

Pharmaceutical industry of india history economics essay

[Economics](#)



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FactsNameYearEstablishment of first Pharmaceutical companyBengal Chemicals & Pharmaceuticals Limited (Calcutta)1956First Drug policy of IndiaDrugs and Cosmetics Act, 1940 (British India)1940The Indian pharmaceutical industry currently tops the chart amongst India's science-based industries with wide ranging capabilities in the complex field of drug manufacture and technology. A highly organized sector, the Indian pharmaceutical industry is estimated to be worth \$ 4. 5 billion, growing at about 8 to 9 per cent annually. It ranks very high amongst all the third world countries, in terms of technology, quality and the vast range of medicines that are manufactured. It ranges from simple headache pills to sophisticated antibiotics and complex cardiac compounds; almost every type of medicine is now made in the Indian pharmaceutical industry. The Indian pharmaceutical sector is highly fragmented with more than 20, 000 registered units. It has expanded drastically in the last two decades. The Pharmaceutical and Chemical industry in India is an extremely fragmented market with severe price competition and government price control. The Pharmaceutical industry in India meets around 70% of the country's demand for bulk drugs, drug intermediates, pharmaceutical formulations, chemicals, tablets, capsules, orals and injectable. There are approximately 250 large units and about 8000 Small Scale Units, which form the core of the pharmaceutical industry in India (including 5 Central Public Sector Units). The government started to encourage the growth of drug manufacturing by Indian companies in the early 1960s, and with the Patents Act in 1970. However, economic liberalization in the 1990s by the former Prime Minister P. V. Narasimha Rao and the then Finance Minister, Dr. Manmohan Singh

enabled the industry to become what it is today. This patent act removed composition patents from food and drugs, and though it kept process patents, these were shortened from a period of seven years to five years. The lack of patent protection made the Indian market undesirable to the multinational companies that had dominated the market, and while they streamed out. Indian companies carved a niche in both the Indian and world markets with their expertise in reverse-engineering new processes for manufacturing drugs at low costs. Although some of the larger companies have taken baby steps towards drug innovation, the industry as a whole has been following this business model until the present. India's biopharmaceutical industry clocked a 17 percent growth with revenues of Rs. 137 billion (\$3 billion) in the 2009-10 financial year over the previous fiscal. Bio-pharma was the biggest contributor generating 60 percent of the industry's growth at Rs. 8, 829 crore, followed by bio-services at Rs. 2, 639 crore and bio-agri at Rs. 1, 936 crore.

Current scenario

India's pharmaceutical market grew at 15. 7 per cent during December 2011. Globally, India ranks third in terms of manufacturing pharma products by volume. The Indian pharmaceutical industry is expected to grow at a rate of 9. 9 % till 2010 and after that 9. 5 % till 2015. The Indian pharmaceutical market is expected to touch US\$ 74 billion sales by 2020 from US\$ 11 billion. The market has the further potential to reach US\$ 70 billion by 2020 in an aggressive growth scenario. Moreover, the increasing population of the higher-income group in the country will open a potential US\$ 8 billion market for multinational companies selling costly drugs by 2015. Besides, the

domestic pharma market is estimated to touch US\$ 20 billion by 2015, making India a lucrative destination for clinical trials for global giants. Further estimates the healthcare market in India to reach US\$ 31. 59 billion by 2020.

Advantage of India for pharmaceutical

The Indian Pharmaceutical Industry, particularly, has been the front runner in a wide range of specialties involving complex drugs' manufacture, development and technology. With the advantage of being a highly organised sector, the pharmaceutical companies in India are growing at the rate of \$ 4. 5 billion, registering further growth of 8 - 9 % annually. More than 20, 000 registered units are fragmented across the country and reports say that 250 leading Indian pharmaceutical companies control 70% of the market share with stark price competition and government price regulations.

Competent workforce: India has a pool of personnel with high managerial and technical competence as also skilled workforce. It has an educated work force and English is commonly used. Professional services are easily available.

Cost-effective chemical synthesis: Its track record of development, particularly in the area of improved cost-beneficial chemical synthesis for various drug molecules is excellent. It provides a wide variety of bulk drugs and exports sophisticated bulk drugs.

Legal & Financial Framework: India has a 53 year old democracy and hence has a solid legal framework and strong financial markets. There is already an established international industry and business community.

Information & Technology: It has a good network of world-class educational institutions and established strengths in Information Technology.

Globalization: The country is committed to a free market

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economy and globalization. Above all, it has a 70 million middle class market, which is continuously growing. Consolidation: For the first time in many years, the international pharmaceutical industry is finding great opportunities in India. The process of consolidation, which has become a generalized phenomenon in the world pharmaceutical industry, has started taking place in India.

Growth of the industry[3]

The Indian pharmaceutical market reached US\$ 10. 04 billion in size, with a value-wise growth rate of 20. 4 per cent over the previous year's corresponding period on a Moving Annual Total (MAT) basis for the 12 months ended July 2010. Cipla maintained its leadership position in the domestic market with 5. 27 % share, followed by Ranbaxy. The highest growth in the domestic market was for Mankind Pharma, which grew 37. 2 per cent. Leading companies in the domestic market such as Sun Pharma (25. 7 per cent), Abbott (25 per cent), ZydusCadila (24. 1 per cent), Alkem Laboratories (23. 3 per cent), Pfizer (23. 6 per cent), GSK India (19 per cent), Piramal Healthcare (18. 6 per cent) and Lupin (18. 8 per cent) had impressive growth during July 2010, shows the data. The pharmaceuticals industry in India will grow by over 100 per cent over the next two years. The pharmaceutical industry is currently growing at the rate of 12 per cent, but this will accelerate soon. The sale of all types of medicines in the country stands at US\$ 9. 61 billion, which is expected to reach around US\$ 19. 22 billion by 2012. India's domestic pharmaceutical market is valued approximately at US\$ 12 billion in 2010, and has shown a strong growth of 21. 3 per cent for the 12 months ending September 2010. It estimates that

over the next 10 years, the domestic market will grow to US\$ 49 billion, at a compounded annual growth rate (CAGR) of 15 per cent. The formulations industry is expected to prosper parallel to the pharmaceutical industry. It is expected that the domestic formulations market in India will grow at an annual rate of around 17 per cent in 2009-10, owing to increasing middle class population and rapid urbanisation.

Swot analysis

It is often said that the Pharma sector has no cyclical factor attached to it. Irrespective of whether the economy is in a downturn or upturn, the general belief is that the demand for drugs is likely to grow steadily in the long term. True in some terms. But are there risks? The SWOT analysis reveals the position of the Indian Pharma industry with respect to its internal and external environment. SWOT mainly extract

asStrengthsWeaknessOpportunitiesThreats

Strengths

oIndia with a population of almost a billion is largely untapped market. In fact the penetration of modern medicines is around 30% in India. To put things in perspective, the per capita expenditure in India is US\$ 93 as compared to Brazil where the same is US\$ 453. oThe growth of middle class in the country has resulted in fast changing lifestyles in urban and to some extent rural centres. This opens a huge market for lifestyle drugs which has a very less contribution in the Indian market. oIndian drug manufacturers are one of the lowest cost producers of drugs in the world. With a scalable labour force, the manufacturers can produce drugs at 40 to 50% of the cost to the rest of the

world. In some cases, this cost is as low as 90%. Indian Pharmaceutical industry possess' excellent chemistry and process re - engineering skills. This adds to the competitive advantage of the Indian companies. The strength in Chemistry skill helps Indian companies to develop processes which are cost effective.

Weakness

The Indian Pharmaceutical companies have to come up with price regulations. The companies which are lowest cost producers are at advantage while those who cannot afford have to either stop production or bear losses. Indian Pharmaceutical companies spend only a fraction of their revenues on Research and Development activities and hence we are still waiting for an invented in India drug. Indian Pharmaceutical market is one of the least penetrated in the world. As a result, Indian majors are relying on exports for growth. To put things in perspective, India accounts for 16% of the world population while the total size of the industry is just 1.3% of the world Pharmaceutical industry. Due to very low barriers to entry, the Indian Pharmaceutical industry is highly fragmented with about 300 large manufacturing units and 23,000 small units spread across the country. This makes the market increasingly competitive. The industry witnesses price competition which further reduces the growth of the industry in terms of value.

Opportunities

India on signing the Free Trade Agreement will have to accept the concept of Data exclusivity. This will further increase the profitability of MNC

Pharmaceutical companies and will force domestic Pharmaceutical companies to focus more on R&D. oLarge number of drugs going off patent in the Europe and US between 2011 and 2015 offers a big opportunity for Indian Pharmaceutical companies to capture these markets. Since generic drugs are commodities by nature, Indian producers have the competitive advantage as they are one of the lowest cost producers of drugs in the world. oOpening up of health insurance sector and rise in the levels of disposable income are key growth drivers from a long term perspective. This leads to the expansion of healthcare industry of which Pharmaceutical industry is an integral part. oBeing economical combined with maximum number of USFDA approved plants outside USA, Indian Pharmaceutical industries can become a global outsourcing hub for Pharmaceutical products.

Threats

oThreat from other low cost producers like China and Israel still exist.
oGovernment planning to include more drugs under price control will affect the profit margins of Pharmaceutical companies which already faces high price competition in the market. oMNCs acquiring major domestic Pharmaceutical companies are affecting the market shares of existing local Pharmaceutical companies further leading to uncertainty.

Pest analysis

To understand the implications of the environment on any industry, it is imperative to study the four cardinal influencers on the industry namely Political, Economic, Social and Technological factors. It is rather unfortunate that in India these factors have a rather disproportionate influence on the

functioning of a commercial organization. From the days of independence, the business environment has been overly regulated by a handful of Bureaucrats, middlemen, businessmen and politicians.

Political factors

oThe minister in charge of the industry has been threatening to impose even more stringent price control on the industry than ever before. This is throwing many an investment plan into the doldrums. oDPCO which has been the bible for the industry has in effect worked contrary to the stated objectives. DPCO nullifies the market forces from encouraging competitive pricing of the goods dictated by the market. Now the pricing is determined by Government based on the approved costs irrespective of the real costs. oIn Pharmaceutical industry there is a huge PSU segment which is chronically sick and highly inefficient. The Government puts the surpluses generated by efficient units into the price equalization account of inefficient units thereby unduly subsidizing them. On a long term basis this has made practically everybody inefficient. oThe Government provides extra drawbacks to some units located in specified area, providing them with subsidies that are unfair to the rest of the industry, bringing in a skewed development of the industry. As a result Pharmaceutical units have come up at place unsuitable for a best cost manufacturing activity.

Economic factors

oIndia spends a very small proportion of its GDP on healthcare. This has stunted the demand and therefore the growth of the industry. oPer capita income of an average Indian is low; therefore, spending on the healthcare

takes a low priority. An Indian would visit a doctor only when there is an emergency. This has led to a mushrooming of unqualified doctors and spread of non-standardized medication. oThe incidence of taxes is very high. There is Excise duty (State & Central), Custom duty, Service tax, Profession tax, License fees, Royalty, Pollution clearance tax, Hazardous substance (storage & handling) license, Income tax, Stamp duty and a host of other levies and charges to be paid. On an average it amounts to no less than 40- 45% of the costs. oThe number of Registered Medical practitioners is low. As a result the reach of Pharmaceutical products is affected adversely. oThere are only 50, 00, 000 Medical shops in India. Again this affects adversely the distribution of medicines and also adds to the distribution costs. oIndia is a high interest rate regime. Therefore the cost of funds is double than that in America. This further adds to the cost of goods.

Socio – cultural factors

oPoverty and associated malnutrition dramatically exacerbate the incidence of Malaria and TB, preventable diseases that continue to play havoc in India decades after they were eradicated in other countries. oPoor Sanitation and polluted water sources prematurely end the life of about 1 million children under the age of five every year. oIn India people prefer using household treatments handed down for generations for common ailments. oThe use of magic/tantrics/ozhas/hakims is prevalent in India. oLarge joint families transmit communicable diseases amongst the members. oEarly child bearing affects the health standards of women and children. oIgnorance of inoculation and vaccination has prevented the eradication of diseases like polio, chicken-pox, small-pox, mumps and measles. oPeople don't go in for

vaccination due superstitious beliefs and any sort of ailment is considered as a curse from God for sins committed.

Technological factors

oAdvanced automated machines have increased the output and reduced the cost. oComputerization has increased the efficiency of the Pharmaceutical Industry. oAyurveda is a well-recognized science and it is providing the industry with a cutting edge. oAdvances in Bio-technology, Stem-cell research have given India a step forward. oHuman - Insulin, Hepatitis B vaccines, AIDS drugs and many such molecules have given the industry a pioneering status. oNewer drug delivery systems are the innovations of the day. oThe huge unemployment in India prevents industries from going fully automatic as the Government as well as the Labour unions voice complains against such establishments.

Pharmaceutical industry of Gujarat[4]

State of Gujarat emerged as an independent state from the than Greater Bombay state on 1st May, 1960. In the pre-independence era & until about emergence of pharmaceutical industries in Gujarat, India was not self sufficient for medicines and was a net importer of the most of bulk drugs & many formulations. In 1947 the year of Independence India's Pharmaceutical production was to the tune of Rs. 100 million only. The synergistic efforts of Central & State Governments & Indian Pharmaceutical Industry resulted in the increase of production of bulk drugs (API) and finished formulations targeting the goal of self reliance in pharmaceutical sector. Today, India is not only self reliant but is net exporter of pharmaceutical products & about

95% of the API & formulations are produced locally. Gujarat leads India in pharmaceuticals and enjoys the share between 35% and 46% of the national share in pharmaceutical production over the last two decades. Ahmedabad and Vadodara are leaders in the production of generics while Ankleshwar and Vapi produce much of India's bulk drugs. The history of the pharmaceutical industry in Gujarat begins in 1907 when Alembic Chemical Works Co Ltd was formed by taking over distilleries in Baroda (Vadodara) with a view to manufacturing alcohol and tinctures primarily for pharmaceutical products. During the 1940s and 50s, companies like Sarabhai Chemicals, The Gujarat Pharmaceutical and Chemical Works, Atul Products Ltd, Allied and Cadila Laboratories were established in the post WW2 period, referred to globally as the 'therapeutic revolution'. An important landmark in the industry's history was the establishment of LM College of Pharmacy at Ahmedabad in 1947. This college has provided many entrepreneurs, technocrats and drug controllers to the pharmaceutical industry in the state. The pharmaceutical industry grew rapidly after Gujarat was declared a state with Dr Jivraj Mehta as its first chief minister in 1960. The number of manufacturers in Gujarat grew from 117 in 1962 to more than 900 in 1985 with a major share in the country's pharmaceutical production. The revisions in the Patent Act also benefited the domestic industry in India (see foreword). Another development that impacted the pharmaceutical sector during this period was the establishment of pharmaceutical machinery manufacturing unit, Cadmach in 1967 by Shri Ramanbhai Patel with products catering to various needs of the pharma industry. During the 1990s and 2000s, Gujarat's companies saw a quantum leap in production and exports

with a strong focus on regulated markets as they geared up for globalisation. The large manufacturers successfully entered the capital markets to make the most of the stock market boom to raise resources for increasing production and research facilities. During the last decade, Gujarat's pharmaceutical companies like Sun Pharma, Zydus Cadila, Torrent and Dishman have been expanding their global footprint through acquisitions, mergers and alliances with international companies and setting up subsidiaries and marketing offices overseas. Gujarat's pharma companies have also been increasingly working towards getting their facilities approved by USFDA and other international regulatory bodies to augment their market presence across regulated and semi-regulated markets. Gujarat's pharmaceutical industry is now ready for sustainable growth, major capacity expansions and an increasingly important role in global consolidation process. In India, there is an increasing spend on healthcare as the emerging economy creates higher incomes, improved health insurance penetration, and lifestyle-related diseases. On the international horizon, there are abundant opportunities for Gujarat's pharmaceutical companies. The outsourcing of R&D with more and more products going off-patent and declining R&D productivity in many countries offers considerable possibilities for india, a preferred off-shoring destination for many countries, especially for companies involved in contract research, manufacturing and clinical trials to leverage their potential. The growth of the generics sector, in which Gujarat already has a substantial share of India's production and exports, also offers much scope of sustainable growth and production expansion. Gujarat's pharma majors have also started scaling up their R&D operations

to tap the huge potential of therapeutic categories that offer opportunities for those who take the lead in becoming global, innovative research-based pharmaceutical companies.[5]REGISTRATION OF MANUFACTURING UNITS

Year	Allopathic	Ayurvedic	Cosmetics	H
2009-10	2355243922	2922	6566816803	4013943784
2010-11	21121	16167		
Total	342835303357			

Source: Statistical Information of Food & Drugs Control Admn. (Gujarat State)

Gujarat contributed nearly 28 per cent of national pharmaceutical exports in the last financial year, which is roughly around Rs 11, 000 crore. The industry is back on a growth track after the relatively dull years during the global meltdown, when exports from the state had dipped, he added. India's net turnover in the pharmaceutical industry including exports is Rs 90, 000 crore, and at present Gujarat is contributing around 30 per cent of total pharmaceutical production in the country. The pharmaceutical industry in the state has been clocking a compounded annual growth rate (CAGR) of 11 per cent. " It had peaked to a 14-15 per cent growth during 2007-08, after which there was a slump in exports growth. Exports had bottomed out during 2008-09, when it grew by only 9. 5 per cent. Net pharma exports from India during 2008-09 was around Rs 30, 759 crore compared to Rs 31, 130. 70 crore in 2007-08. Gujarat contributed around 22-24 per cent of national pharmaceutical exports during that period. One of the reasons behind the state's revival in terms of pharmaceutical exports is the coming home of many Gujarat based companies in the last two years who had moved to tax-free havens like Uttrakhand and Sikkim. The state's share in national pharmaceutical production, once around 42 per cent, had fallen to 20 per cent during 2008-09. The graph, Doshi said, is back

on its upward curve for the past few years, for two reasons. One, the deadline for tax exemption in most hill states is nearing the deadline. Two, the excise duty is now down to 4 per cent from 16 per cent in 2006-07, so the hill states are not as attractive. Many companies in the state are in the middle of setting up or expanding their special economic zones (SEZ) which is likely to boost exports in the coming years.[6]

Top pharmaceutical companies of India[7]

Ranbaxy Labs

With total net sales of Rs 7686. 59 crore, Ranbaxy is the largest pharmaceutical company in India.

Cipla

With total net sales of Rs 6, 977. 50 crore Cipla is the second largest pharmaceutical company in India.

Dr Reddys Labs

With total net sales of Rs 6, 686. 30 crore Dr Reddys Labs is the third largest pharmaceutical company in India.

Lupin

Lupin is the fourth largest pharma company in India with the total net sales of Rs 5, 364. 37 crore.

Aurobindo Pharma

Aurobindo Pharma is on 5th position with the total net sales of Rs 4, 284. 63 crore.

Sun Pharma

Net Sales revenues stood at Rs 4, 015. 56 crore makes it the sixth largest pharmaceutical company in India.

Cadila Health

Cadila Health is the seventh largest pharma company with the total sales revenue of Rs 3, 152. 20 crore.

Jubilant Life

Eight largest company has the total sale revenue at Rs 2, 641. 07 crore.

Wockhardt

Wockhardt has the total net sales of 2, 560. 16 crore and the ninth largest pharmaceutical company in India.

Ipca Laboratories

Revenue of Rs 2, 352. 59 crore makes Ipca India's 10th largest pharma firm by sales.

Pharmaceutical industry of Sri Lanka

History

FactsNameYearEstablishment of first Pharmaceutical company[8]Dumex Limited (Ceylon)1956First Drug policy of Sri Lanka[9]Drug Policy

19601960The First pharmaceutical Company was incorporated in 1956 creating a milestone in the healthcare industry by setting up the first pharmaceutical and veterinary manufacturing facility in the country. The

Company operated under the following names resulting from change in

ownership of the majority shareholding:-1956 to 1958 - Dumex Limited - <https://assignbuster.com/pharmaceutical-industry-of-india-history-economics-essay/>

Ceylon 1958 to 1963 - Pfizer Dumex Limited - Ceylon 1963 to 1993 - Pfizer Limited - Sri Lanka 1993 to date - Astron Limited

In 1971 under the State Industrial Corporations Act Number 49 of 1957 The State Pharmaceuticals Corporation was established. This far-sighted decision was the result of the Bibile - Wickramasinghe Report (March 1971) on an assignment given to them by the then Prime Minister, Hon Sirimavo Bandaranaike. Going by the ideals of its founding father Professor Senaka Bibile, the State Pharmaceuticals Corporation (SPC) has at all times striven to provide quality assured drugs at prices that are among the lowest in the world. For the past 28 years SPC has been the sole supplier of pharmaceuticals, surgical consumable items, laboratory chemicals and equipment to all institutions administered by the health ministry. In 1977 with the advent of the open economy SPC was called upon to compete with the private sector. Even though the monopoly status ceased, SPC continued to operate as a viable institution, continuing to hold about 30% of the private sector market share - which is the largest share for any single pharmaceutical firm. At present we supply about 2000 drugs covering a wide spectrum of pharmacological activity. The well established island wide network of distribution ensures that our products reach every part of the country. SPC has 18 Rajya Osu Salas, 36 Franchise Osu Salas, 48 Distributors and 20 Authorized Retailers spread throughout the country. Our retail outlets, The Rajya Osu Salas and Franchise Osu Salas maintain the highest standards in pharmacy and dispensing practice. The newly opened Quality Assurance Laboratory at the Head Office carries out the quality testing of all the pharmaceuticals, that we supply. We are committed to health care in Sri Lanka and we will continue to

serve the nation by providing quality assured health care products at affordable prices.

Current Scenario[10]

The total pharmaceutical market of Sri Lanka is approximately US\$ 365 million of which the private retail market accounts for approximately 60% of sales while the government hospital purchases account for approximately 28%, private hospitals account for approximately 10% and dispensing family physicians account for approximately 2% of the total pharmaceutical business. According to independent market research the pharmaceutical market has grown by 17.55% (IMS MAT Q2 2012) versus the same period last year indicating much promise for a bright future. The end of the war against terror which clouded the progress of Sri Lanka for the last 3 decades has now brought about a new lease of life to the country's progress which will no doubt have a positive effect also on the healthcare sector in Sri Lanka. As it is, the Sri Lankan healthcare sector can boast of being on par with the high standards of the developed world and further expansion into more rural areas as well as the development of the northern and eastern regions of the country which had deteriorated due to the war will create further potential for growth and expansion of the private healthcare sector and thus the future opportunities in the pharmaceutical industry look very promising. Pharmaceuticals : LKR50.68bn (US\$458mn) in 2011 to LKR59.90bn (US\$501mn) in 2012; +18.2% in local currency terms and +9.4% in US dollar terms. Healthcare: LKR250.62bn (US\$2.27bn) in 2011 to LKR278.82bn (US\$2.34bn) in 2012; +11.3% in local currency terms and +3.0% in US dollar terms. Medical devices: LKR11.20bn (US\$101mn) in 2011 to

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LKR11. 97bn (US\$100mn) in 2012; +6. 9% in local currency terms and -1. 1% in US dollar terms. Risk/Reward Rating: According to our Q4 12 regional matrix, Sri Lanka is ranked 15th out of the 18 markets in surveyed, above Pakistan and Bangladesh. Sri Lanka's rewards and risks profiles are relatively evenly balanced, with low per capita expenditure on drugs and the modest overall market size some of key factors contributing to its low ranking. The competitive landscape section provides comparative company analyses and rankings by US\$ sales and % share of total sales - for the total pharmaceutical sector, as well as the OTC, generics, and distribution sub-sectors.

SWOT analysis

Strengths Weakness Opportunities Threats

Strengths

Considerable investments coming into the country and new infrastructure projects taking off, post war Sri Lanka is enjoying the dividends of peace. The industry sector has been exhibiting a convincing uptick since the global recession, expanding 10. 3% in the first half against 8. 4% in the first half of 2010. The Sri Lankan government aims to lift the industrial sector's share of GDP to 35% by 2015, from 28. 7% in 2010.

Weakness

Lack of technology penetration in pharmaceutical industry Unskilled labor force Lack of investment and capital problem in pharmaceutical sector Sri Lankan pharmaceutical companies spend no or fraction of their revenues on

research and development activities and hence we are still waiting for an invented in India drug.

Opportunities

Indian, European and US pharmaceutical companies interested to develop their oppressesions in emerging economy of Sri LankaNew opportunities in production of personal care, cosmetics, surgical etcMNC has also started operation in Sri Lanka after the war has been over

Threats

Threat from other low cost producers like India, China and Israel still exist. Government policy of drugs under price control will affect the profit margins of Pharmaceutical companies which already faces high price competition in the market. MNCs acquiring major domestic Pharmaceutical companies are affecting the market shares of existing local Pharmaceutical companies further leading to uncertainty.

TOP PHARMACEUTICAL COMPNIES IN SRI LANKA

Aventis Pharma LimitedChemical Industries (Colombo) LtdHemas

Pharmaceuticals (Pvt) LtdIndoscan (Pvt) LimitedKandana Food and Drugs

(Pvt.) Ltd. Lanka Medical (Imports) LtdS A Medicals (Pvt) Ltd. Stiefel

Laboratories (Pte) LimitedThorn Pharmaceuticals Pvt Ltd

Export of Indian pharmaceutical products to Sri Lanka[11]

Dated: 30/3/2013Commodity: 3006 MISCELLANEOUS PHARMACEUTICAL

GOODSCountry: SRI LANKA DSR

S. No.**Year****2007-2008****2008-2009****2009-2010****2010-2011****2011-2012****Growth Average**

1Values in Rs. Lacs495. 46423. 1497. 74346. 87635. 76479. 792%Growth

-14. 617. 64-30. 3183. 2814. 003Total export of commodity16, 726. 2325,
523. 0226, 010. 9034, 306. 0246, 889. 6729891. 174%Growth

52. 591. 9131. 8936. 6824. 615%Share of country (1 of 3)2. 961. 661. 911.

011. 361. 786Total export to country1, 137, 4281, 089, 4971, 028, 9601,
596, 2382, 095, 1451389453. 67%Growth-4. 21-5. 5655. 1331. 2619.

168%Share of commodity (1 of 6)0. 040. 040. 050. 020. 030. 036Commodity:

30061010 STERILE SURGCL CATGUT, SMLR MTRLS & STRLE TISSUE ADHSVS

FOR SURGICAL WOUND CLOSURECountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs 420. 32333. 27291. 0474. 51308. 742.%Growth

-20. 71-12. 67-74. 40314. 35Commodity: 30061020 STERILE LAMINARIA &
LAMINARIA TENTS.& STRILE ABSRBBLE SURGCL/DENTAL

HAEMOSTATICSCountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs 0. 333. 330. 793. 419. 752.%Growth

921. 15-76. 19330. 33186. 22Commodity: 30062000 BLOOD-GROUPING

REAGENTSCountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs

2. 281. 75

2.%Growth

-23. 43

Commodity: 30063000 OPACIFYING PRPNS FR X-RAY EXAMS;
DIAGNOSTICREAGNTS DSGND TO BE ADMNSTRD TO PATIENT BE
ADMINISTERED TO THE PATIENTCountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs

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4. 5711. 5425. 5838. 142.%Growth

152. 55121. 7449. 09Commodity: 30064000 DENTAL CEMENTS AND OTHR
DENTAL FILLINGS BONE RECONSTRUCTION CEMENTSCountry: SRI LANKA
DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs3. 128. 9110. 127. 5954. 002.%Growth

185. 7113. 52-24. 94611. 05Commodity: 30065000 FIRST-AID BOXES AND
KITSCountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs0. 5913. 824. 930. 020. 052.%Growth

2, 261. 69-64. 33-99. 53113. 68Commodity: 30066010 CONTRACEPTIVE
BASED ON HORMONESCountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs27. 0833. 7058. 47168. 37142. 602.%Growth

24. 4473. 52187. 95-15. 31Commodity: 30066020 CONTRCEPTIV BASE ON
OTHR PROD. OF HDNG 2937Country: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs0. 44

3. 671. 562.%Growth

-57. 61Commodity: 30067000 GEL PREP TO BE USED IN HUMAN OR
 VETERINARYMEDICINE AS A LUBRICANT FOR PARTS OF BODYFOR SURGI
 OPER/PHYS EXAM BETCountry: SRI LANKA DSR

S. No.

Year

2007-2008

2008-2009

2009-2010

2010-2011

2011-2012

1. Values in Rs. Lacs30. 3123. 22119. 1062. 1280. 592.%Growth

-23. 39412. 96-47. 8529. 74Total Import & Export between India and Sri
 Lanka (values in Crore Rs.)YearCountryExportImportTotal TradeTrade
 BalanceGrowth (%)2007-08SRI LANKA DSR11, 374. 292, 540. 9213, 915.
 218, 833. 372008-09SRI LANKA DSR10, 894. 971, 623. 6812, 518. 659, 271.
 294. 962009-10SRI LANKA DSR10, 289. 611, 850. 0212, 139. 628, 439. 59-8.
 972010-11SRI LANKA DSR15, 962. 382, 278. 7318, 241. 1213, 683. 6562.
 142011-12SRI LANKA DSR20, 951. 463, 435. 7224, 387. 1717, 515. 7428.
 0021. 53