TRANSFORMING BRANDED GENERICS INTO POWER BRANDS: A FRAMEWORK FOR BUILDING PREMIUM POSITIONING IN INDIA'S PRICE-SENSITIVE MARKETS

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by

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Under the Supervision and Guidance of

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2025

B – BLACK BELT BRAND BUILDERS

CERTIFICATE

This is to certify that ***Pranav Ayush*** *in partial fulfillment of the requirements for the award of the degree of MBA (Pharmaceutical Management) from the IIHMR University, Jaipur has successfully completed his internship at B Black Belt Brand Builders during March 10 - May 31, 2025.*

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CERTIFICATE

This is to certify that the dissertation titled **Transforming Branded Generics into Power Brands: A Framework for building Premium Positioning in India's Price-Sensitive Markets** is a record of the research work undertaken by **Pranav Ayush** in partial fulfillment of the requirements for the award of the degree of MBA (Pharmaceutical Management) from the IIHMR University, Jaipur under my guidance and supervision and his/her approach to the research study has been sincere, scientific, and analytical.

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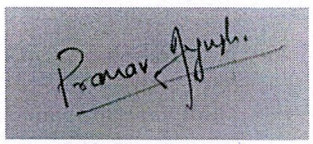
DECLARATION BY STUDENT

I hereby declare that this dissertation titled "Transforming Branded Generics into Power Brands: A Framework for Building Premium Positioning in India's Price-Sensitive Markets" is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

(Signature)



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May 31, 2025

ABSTRACT

Branded generics dominate the Indian pharmaceutical business, accounting for a significant portion of both prescriptions and sales. Despite their clinical equivalency to innovative pharmaceuticals, these products frequently face commoditization, pricing wars, and poor brand equity as a result of a lack of uniqueness and perception issues.

The main objective of this research is to create a strategy framework for repositioning branded generics as high-end power brands. It looks at how value-based branding, patient trust, physician involvement, and digital marketing can help branded generics rise above cost-based competition to become reputable and successful medical products.

The research design used was a mixed-method approach. Semi-structured interviews with physicians, pharmacists, and marketing experts were used to gather primary data. Academic publications, industry reports, and case studies of successful branded generics were the sources of secondary data. Correlation studies and profitability comparisons before and after brand repositioning were included in the quantitative study.

Pharmaceutical companies who made investments in digital tactics, consistent medical interaction, scientific validation, and emotional branding saw increases in brand preference of up to 25% and profitability of up to 30%. By avoiding pricing wars, these firms were able to win over customers' loyalty and trust.

Strong therapeutic associations, ongoing HCP engagement, patient education, emotive narrative, and digital presence are important facilitators of premium positioning. Through comprehensive branding initiatives, successful cases such as Dolo 650, Livogen, and Sporlac show that branded generics can achieve long-term value and household awareness.

The study suggests a structure with five pillars: digital amplification, emotional branding, retail integration, HCP participation, and scientific validation. Value-driven branding, as opposed to price-based selling, can boost adherence, boost profitability, and foster greater trust.

Indian pharmaceutical companies need to reconsider their branding in a changing healthcare landscape. Branded generics have the potential to become power brands with careful investment, combining price, quality, and trust with better medical results.

ACKNOWLEDGEMENT

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Date – 31st May 2025 **Pranav Ayush**

Place- Jaipur

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CHAPTER 1: INTRODUCTION

1.1 Context and Background

India is one of the world's leading producers and exporters of generic medications, giving its pharmaceutical industry a significant place in the global economy. India is known as the "pharmacy of the world," and thanks to its extensive manufacturing of reasonably priced drugs, it now supplies 20% of the world's total supply by volume. Nevertheless, there is a contradiction in the domestic market despite this dominance. Internally, fragmented healthcare delivery, limited insurance penetration, and fierce price competition—especially in the branded generics market—restrict the industry that leads in affordability and size externally.

Approximately 75% of the Indian Pharmaceutical Market (IPM) is made up of branded generics, which are pharmaceuticals that are sold under proprietary names but are chemically identical to original products. Despite having the same functionality as generics without a brand, some drugs are set apart by branding and doctor involvement. Indian consumers and prescribers have significant brand-name preferences, which create a unique dynamic in the marketing and consumption of generics. This is in contrast to many Western countries where pharmaceuticals are administered by chemical name.

In India, branded generics are frequently perceived as being of lower quality, even when they are medically comparable and more affordable. Despite the fact that branded and unbranded generics go through comparable manufacturing procedures and frequently originate from the same production facilities, this notion nevertheless exists. The psychological link between cost and quality, ingrained attitudes, a lack of public health literacy, and uneven application of bioequivalence standards are the causes of the dilemma.

1.2 The Branding Challenge in Indian Generics

Commoditization, in which goods are seen as interchangeable and compete primarily on price, is the main issue facing branded generics. Thinner margins, erratic market share, and diminished brand loyalty result from this. Unless they effectively differentiate, businesses are trapped in a race to the bottom in a market crowded with hundreds of similar products, many of which have price discrepancies surpassing 400%.

Creating a powerful brand identity becomes crucial in this situation. In the pharmaceutical industry, a power brand is characterized by its credibility, emotional resonance, physician preference, and consumer recall in addition to its market dominance. Branded generics necessitate a carefully calibrated branding strategy that includes scientific validation, physician engagement, patient education, retail integration, and digital outreach, in contrast to innovator drugs that depend on patent exclusivity or unbranded generics that are selected based on price. Dolo 650, Livogen, Sporlac, and Saridon are just a few examples of case studies that show how branded generics may overcome price sensitivity, win over customers, and even become household names. These illustrations show how strategic branding can add long-term value in an industry that is frequently characterized by immediate financial concerns.

1.3 Market Opportunity and Justification for the Study

The market for branded generics in India was estimated to be worth USD 22.7 billion in 2021 and is expected to reach USD 41.9 billion by 2030, growing at a compound annual growth rate (CAGR) of 7%. This growth is being driven by a number of factors, including the rise in the prevalence of chronic illnesses, improved access to healthcare in rural areas, the rise of a middle class that is health-conscious, and government programs like the Pradhan Mantri Bhartiya Janaushadhi Pariyojana and Ayushman Bharat. Since branded generics continue to be the most popular medicine class despite this expansion, it is even more urgent to improve their positioning and reputation.

Pharmaceutical businesses are beginning to understand that cost leadership by itself is not sustainable from a strategic standpoint. Price competition makes brands susceptible to substitution and restricts profitability. However, premium positioning based on brand equity, trust, and quality control enables businesses to charge higher margins and foster enduring customer loyalty. There is a greater chance than ever to change the perception of branded generics as patients grow more knowledgeable and tech-savvy.

1.4 Problem Statement

In India, branded generics have poor brand equity despite being widely used. This hinders their capacity to stand out from the competition, secure premium value, and cultivate enduring customer loyalty. The widespread misconception that "cheaper means lower quality" erodes

patient trust and discourages doctors from using name-brand generics over more expensive ones. The majority of items in this market remain generic in the most literal sense—indistinct, interchangeable, and transactional—in the absence of persistent branding initiatives.

Additionally, physician-targeted advertisements have been the main emphasis of pharmaceutical branding in India. In a market where consumer behavior is becoming more and more important, direct-to-consumer tactics, emotive storytelling, internet campaigns, and patient interaction have all been neglected. Therefore, a mismatch between branding strategies and the changing expectations of healthcare stakeholders is the main issue.

1.5 Research Aim and Objectives

In India's price-sensitive pharmaceutical market, the study's objective is to provide a workable framework for turning branded generics into power brands with premium positioning. The study investigates how branded generics can overcome commoditization and build consumer trust through value-based branding, regular physician involvement, regulatory support, and digital outreach.

The study's specific goals are:

1. To evaluate the present obstacles branded generics face in building trust and brand uniqueness.
2. To determine the essential branding elements that have helped well-known power brands in the Indian pharmaceutical industry succeed.
3. To examine how stakeholders, particularly doctors, pharmacists, and consumers, view premium branding and branded generics.
4. To assess how branding tactics affect prescription behavior, brand recall, and profitability.
5. To put up a tactical plan that allows pharmaceutical firms to reposition branded generics as high-end, reliable medical treatments.

1.6 Research Questions

The following important questions are the focus of this study:

- What are the main obstacles to branded generics in India building strong brand equity?

- What impact do doctors' and consumers' opinions have on the success of branded generics?
- Which branding strategies have contributed to the rise of some branded generics to the position of power brands?
- In the pharmaceutical industry, how can digital engagement, emotional branding, and price tactics support brand differentiation?
- How do supply chain elements and pharmacists affect the visibility and uptake of a brand?

1.7 Scope and Significance of the Study

The Indian pharmaceutical market is the exclusive subject of this study, with branded generics offered through retail pharmacies receiving special attention. Stakeholder viewpoints from retail pharmacists, prescribing physicians, product managers, and marketing executives in metropolitan, tier-2, and tier-3 cities are included in the scope. Hospital-only prescriptions, innovator medications with patent protection, and unbranded generics are not included in the study. The timely intervention of this research is what makes it significant. Indian pharmaceutical companies have both a challenge and an opportunity to rethink their branding strategy in light of growing internet penetration, shifting patient expectations, and rising healthcare expenses. Through the creation of a premium positioning model for generics, this study provides a way forward for long-term expansion, customer confidence, and better health results.

Moreover, the study adds to larger discussions on pharmaceutical access, quality control, and ethical marketing by reorienting the emphasis from price-led competition to value-driven engagement. Such tactics, if successfully applied, might close the trust-price gap and increase the acceptability of high-quality generics among patients and prescribers.

1.8 Conceptual Framework

This study's conceptual framework is supported by five interconnected pillars:

1. **Scientific Validation:** Using regulatory certifications, bioequivalence data, and clinical trials to establish credibility.

2. **Physician Engagement:** Preserving loyalty and trust via post-prescription assistance, scientific communication, and continuing medical education initiatives.
3. **Emotional Branding:** Using visual branding and storytelling to engage customers with human values like health, caring, and well-being.
4. **Retail Alignment:** Guaranteeing visibility at the point of sale, inventory availability, and continuous pharmacist support.
5. **Digital Outreach:** Using social media, health applications, and e-pharmacies to raise awareness, encourage interaction, and get feedback.

These components work together in a larger ecosystem that consists of healthcare delivery systems, market pressures, and regulatory bodies. According to the study, a product can become a trusted brand by applying these components in a coordinated manner.

1.9 Methodological Overview

The study uses a mixed-methods research methodology in order to investigate these dynamics. Semi-structured interviews with pharmaceutical executives, physicians, and pharmacists are part of the qualitative component, which aims to shed light on branding tactics, attitudes, and difficulties. Sales patterns, price differences, and brand performance prior to and during repositioning efforts are among the secondary data that are analyzed by the quantitative component.

IQVIA, Frost & Sullivan, and McKinsey industry reports, scholarly journals, government policy documents (such CDSCO and NPPA), and case studies of successful branded generics are important sources of secondary data. When combined, these techniques allow for a thorough examination of the issue and guarantee that the framework that is produced is supported by both empirical data and stakeholder experience.

1.10 Structure of the Dissertation

This dissertation is structured as follows:

- **Chapter 2: Literature Review** – Explains how consumer behavior, market dynamics, regulatory frameworks, and pharmaceutical branding all impact branded generics in India.

- **Chapter 3: Research Methodology** – Explains the analytical framework, data sources, sample methods, research design, and ethical issues.
- **Chapter 4: Discussion** – Combines the data's results and relates them to the literature review's theoretical insights.
- **Chapter 5: Recommendation** – Outlines practical tactics that pharmaceutical companies may use to reposition branded generics.
- **Chapter 6: Results** – Examines the information gathered and describes how branding tactics affect the behavior of doctors and consumers.
- **Chapter 7: Conclusion** – Analyzes the data acquired and explains how branding strategies impact consumer and physician behavior.

CHAPTER 2: LITERATURE REVIEW

Despite its global leadership in generic production, India's pharmaceutical industry has particular internal difficulties brought on by price sensitivity, brand commoditization, and uneven brand equity among generic medications. In order to investigate how branded generics can be strategically turned into power brands in the Indian setting, this literature review assesses the body of current academic and commercial research. In order to provide a solid model for premium positioning of generics, it integrates research from marketing theory, pharmaceutical branding, consumer behavior, healthcare access, and regulatory frameworks.

Branded generics combine the medicinal equivalency of generic medications with the branding techniques of innovator medications to be sold under a proprietary brand name. In contrast to Western markets where generic medications are marketed by their chemical names, over 80% of pharmaceutical sales in India are of branded generics. India's fragmented healthcare delivery and low health insurance penetration, where trust and recognition at the moment of prescription greatly impact choices, are the main causes of this structural divergence.

Suryawanshi et al. (2017) showed that despite the fact that branded generics and their branded equivalents exhibit similar antibacterial activity, marketing asymmetries and a lack of understanding cause the perception of inferior quality to endure. This disparity in perception emphasizes how vital it is to spend money on brand development that goes beyond packaging.

(*Branded versus Generic (Branded-Generic) Medicines-For Whose ...* (n.d.). https://www.jbclinpharm.org/articles/branded-versus-generic-brandedgeneric-medicinesfor-whose-benefit.pdf

A "power brand" is one that commands a sizable market share, customer loyalty, and price power, according to Kotler and Keller (2016). Dolo 650 (paracetamol), when applied to the pharmaceutical industry, serves as an example of a successful transition from a generic chemical to a power brand. Dolo 650 overcame price-based competition and established itself as a reliable product because to its widespread availability, steady physician engagement, and demand throughout the pandemic (Indian Pharmaceutical Alliance, 2022).

[PDF] Kotler Keller. (n.d.). https://students.aiu.edu/submissions/profiles/resources/onlineBook/S3D7W4_Marketing_Management.pdf

According to a study by Selvaraj and et.al. (2022), drug brand equity is mostly based on prescription practices and HCP (healthcare professional) trust rather than just consumer promotions. This is in line with Ajzen's (1991) behavioral model, which highlights how authority endorsement shapes consumer behavior. In this instance, doctors are the main influences.

Evaluating the impact of price regulation (Drug Price Control Order ... (2022). https://pmc.ncbi.nlm.nih.gov/articles/PMC9587621/

One characteristic that sets the generic medication business in India apart is price battles. The identical chemical can be sold under hundreds of brand names with price differences that can occasionally surpass 400%, according to research by Adam Zamecnik. (2025). These pricing variations, however, are frequently the result of trade margins, marketing expenses, and physician incentives rather than variations in quality.

Adam Zamecnik. (2025). *Indian Generic Players Begin Price War Over Generic Empagliflozin* https://insights.citeline.com/generics-bulletin/products/generics/indian-generic-players-begin-price-war-over-generic-empagliflozin-launches-4JLN6G5P7NDZVGEOBCQP4NKDJM/

Pricing by itself has not ensured long-term brand loyalty or profitability, even in the face of a very price-conscious consumer base. According to Mehta (2018), perceived value—which includes perceived quality, trust, and accessibility—builds long-term brand preference, whereas pricing propels initial uptake? Businesses that solely compete on price run the risk of becoming commoditized in this situation, which lowers profitability and erodes brand recognition.

[PDF] How-brand-image-and-perceived-service-quality-affect-customer ... (n.d.). https://www.abacademies.org/articles/How-brand-image-and-perceived-service-quality-affect-customer-loyalty-through-customer-satisfaction-1528-2678-24-1-262.pdf

In the pharmaceutical industry, perception is crucial to brand distinction. Despite scientific evidence to the contrary, a Josef Bednarik. (2003) study found that Indian patients frequently correlate higher pricing with better quality. Despite being illogical, this price-quality heuristic endures because of inadequate health literacy and uneven experiences with inexpensive generics. Additionally, research indicates that generic medicine equivalency is frequently unknown to Indian customers. Generic mistrust is still high, even among patients who are well-educated. This leads to a vicious cycle in which branded generics, even when they are bioequivalent, have trouble gaining confidence, highlighting the need of physician advocacy and patient education in brand transformation. Josef Bednarik. (2003). *Does brand differentiate pharmaceuticals? - PubMed*. https://pubmed.ncbi.nlm.nih.gov/16380705/

In India's ecosystem of branded generics, doctors are crucial. Indian doctors play a major role in deciding which brand of medication a patient takes, in contrast to developed markets where pharmacy-level replacement is typical. Medical representation and Continuing Medical Education (CME) programs support this, and they have an impact on prescribing practices (IMS Health, 2016). According to a perceptive paradigm put forth by Aivalli et al. (2018), four important aspects influence prescriber preference: post-prescription support, brand reputation, scientific evidence, and medical representative participation. Prescriber loyalty is often earned by brands that regularly meet these touch points, and this loyalty subsequently transfers into patient demand and brand recall. Consequently, turning a branded generic into a power brand still heavily relies on physician involvement. *Perceptions of the quality of generic medicines: implications for trust ...* (2018). https://pmc.ncbi.nlm.nih.gov/articles/PMC5844374/

Historically, harmonizing bioequivalence testing and quality compliance across manufacturers has been a challenge for India's pharmaceutical regulatory system, which is supervised by the Central Drugs Standard Control Organization (CDSCO). The lack of required bioequivalence testing for many generics has undermined public trust, claim. Furthermore, rules do not clearly distinguish between branded and unbranded generics, which causes market overpopulation. According to studies, the public's confidence in branded generics would be greatly increased by implementing bioequivalence requirements and providing regulatory clarity. Regulatory change

must therefore support marketing initiatives since it is a fundamental element of brand trust. *CDSCO Medical Regulatory Bodies*. (2024). http://www.dghs.mohfw.gov.in/cdsco.php

Patients now have more access to online shopping platforms and health information thanks to India's healthcare industry's digital transformation. More than 400 million Indians have digital connections to health platforms, opening up new channels for patient interaction and pharmaceutical branding, according to Ministry of Health and Family Welfare 2025 HealthTech research. Businesses are now able to interact directly with customers, inform them of the advantages of their products, and provide loyalty programs thanks to digital tools like smartphone applications, e-pharmacies, and WhatsApp health bots. This strategy has been employed by pharmaceutical companies such as Practo and Netmeds to increase customer awareness of their brands. Therefore, telemedicine and internet marketing are essential venues for patient education, emotional branding, and service continuity in addition to being promotional instruments. *From Data to Diagnosis Transforming Healthcare through ... - PIB*. (2025). https://www.pib.gov.in/PressReleaseIframePage.aspx?PRID=2094604

Linking the medicine brand to particular medical conditions, results, and emotional comfort is a key component of creating a powerful therapeutic identity. This is consistent with Greenslit's (2002) branding concepts, which highlight emotional distinctiveness as the foundation of sustained brand loyalty. Companies such as Liv 52 (a liver tonic) and Saridon (an analgesic) have successfully developed a story that transcends practicality and into the public consciousness. A generic medication can be positioned as reliable and patient-focused through emotional branding, patient endorsements, and health outcome reports. This approach has a lot of potential in the healthcare system in India, where feelings frequently take precedence over facts. *Pharmaceutical branding: identity, individuality, and illness - PubMed*. (2008). https://pubmed.ncbi.nlm.nih.gov/14993408/

The supply chain for pharmaceuticals in India is very dispersed. At the point of sale, retail pharmacists have a significant impact on brand substitution. More than 60% of generic brand swaps occur at the pharmacy level, frequently due to profit considerations, according to a 2022 IQVIA analysis. Thus, backend tactics like margin sharing, inventory support, retailer loyalty programs, and pharmacist training are essential for guaranteeing brand availability and awareness. According to Bolineni (2016), pharmacist alignment and supply chain efficiency can quietly strengthen trust and establish brand dependability at the final mile. Distributors and

chemists must be seen by businesses as vital brand touchpoints as well as logistics conduits. Prasad Bolineni. (2016). *The Indian Pharmaceutical Industry's Supply Chain Management Strategies*.

https://www.semanticscholar.org/paper/0c201da73768188ea3ac81701e44bdd582e5ae61

The following noteworthy instances show that turning branded generics into power brands is feasible:

1. Dolo 650 (Micro Labs): During COVID-19, it used its steady supply, media presence, and doctor trust to establish itself as a household name for paracetamol.
2. Sporlac (probiotic): To increase emotional resonance and familiarity in the home, the company positioned itself as a family health supplement rather than a prescription medication.
3. Livogen (iron supplement): Direct-to-consumer marketing was used to link the brand to female health, vigor, and energy.

These companies have been successful due to their distinctive brand narratives, long-term investment in trust, and HCP engagement, not because of their unique chemicals.

According to the literature, a unified and multi-layered approach is necessary to turn a branded generic into a strong brand. Among the main pillars are:

1. Scientific Validation: Supporting goods with empirical data, clinical trials, and scholarly approvals.
2. Physician Engagement: CME initiatives, ongoing education, and moral marketing tactics.
3. Patient education: To demystify generics, use emotional branding, digital outreach, and clear language.
4. Retail Alignment: Channel alliances with online pharmacies, wholesalers, and retailers.
5. Regulatory Support: Promotion of standards and clear bioequivalency data.

To produce unique value that endures beyond simple price competition, this integrated strategy must be maintained over time.

The pharmaceutical industry in India is dominated by branded generics, which hold a significant market share in terms of both volume and income. The market for branded generics in India was estimated to be worth USD 22.7 billion in 2021 and is expected to expand at a compound annual growth rate (CAGR) of about 7% to reach USD 41.9 billion by 2030. This has strong

development possibilities due to rising chronic disease incidence, increased access to healthcare, and government programs like the Pradhan Mantri Bhartiya Janaushadhi Pariyojana and Ayushman Bharat plans that aim to increase availability and affordability. *Share of generics in the total pharmaceutical market*. (2018). https://www.oecd.org/en/publications/oecd-economic-surveys-czech-republic-2018_eco_surveys-cze-2018-en.html

In India, pharmaceutical drugs that are marketed under brand names but are fundamentally generic in nature are known as "branded generics." In India, nearly all medications are sold as branded generics, which are seen differently by patients and prescribers than unbranded generics, in contrast to many other markets where generics are mostly unbranded. This is partially due to the fact that people mostly rely on brand prescriptions, which restricts the use of generic medications, and doctors are not required by law to prescribe them. Because of these factors, branded generics dominate the market despite cost sensitivity, accounting for roughly 75% of volume and 90% of value. M Premanath & P Kulkarni. (2024). Generic Drugs or Branded Generics, Which One You Prefer to Prescribe? In *APIK Journal of Internal Medicine*. https://journals.lww.com/joim/fulltext/2024/12030/generic_drugs_or_branded_generics,_which_one_you.14.aspx

According to market segmentation, the largest and fastest-growing section of the Indian branded generics market is anti-hypertensive medications. Other therapeutic categories that follow include hormones, antimetabolites, lipid-lowering medications, antidepressants, and anti-epileptics. The nation's epidemiological movement towards non-communicable diseases is reflected in the expansion of chronic therapies, especially in the fields of cardiology and endocrinology. The ongoing need for these treatments is fueled in part by the growing number of elderly people and changes in lifestyle. S. Sindrup & F. Bach. (2002). *Antidepressants, antiepileptics, and antiarrhythmic drugs*. https://www.semanticscholar.org/paper/d7aa4ce67eff30debfad7b587d4b91550471a790

India is known as the "pharmacy of the world" because of its extensive manufacture and exportation of generic medications, which account for 20% of the world's total supply. Both volume and price growth are driving the domestic pharmaceutical market's (IPM) robust compound growth rate of 9.1% from 2019 to 2023 and is expected to continue growing at a rate of roughly 9.6% until 2030. Interestingly, branded generics account for over 87% of the IPM by value, underscoring the market structure's established position at home. *Share of generics in the*

total pharmaceutical market. (2018). https://www.semanticscholar.org/paper/9ef71c61be6dd0e6f2830457dec02f816f6aa5f9

Many factors are driving the expansion of branded generics in India. These include the growing burden of chronic diseases, the expansion of urban middle classes with improved access to healthcare, and the rising demand for healthcare brought on by population increase. Additionally, while government initiatives like generics promotion programs and price control laws under the Drug Price Control Order (DPCO) have improved access, they have also increased pricing pressures that affect market strategy. Reji K. Joseph. (2015). *The drug price control system in India and access to medicines*. https://www.semanticscholar.org/paper/abb53690022ab4df85005ce3bec0b6056bdaf08d

Despite the focus on generics, branded generics continue to hold considerable value because of consumer and physician preferences as well as worries about the quality of generic medications in India. Market segmentation and price power are impacted by the perception of quality and trust, which is still a crucial consideration in prescription and purchase decisions. However, research has demonstrated that the quality metrics of branded generics and branded medications made by the same businesses are frequently similar, suggesting a possible discrepancy between perception and scientific fact. GL Singal, A Nanda, & A Kotwani. (2011). A comparative evaluation of price and quality of some branded versus branded-generic medicines of the same manufacturer in India. In *Indian journal of pharmacology*. https://journals.lww.com/iphr/fulltext/2011/43020/a_comparative_evaluation_of_price_and_quality_of.6.aspx

In India's pharmaceutical industry, the conversion of branded generics into power brands presents both a challenge and an opportunity. Current research shows that perception, trust, physician influence, and consistent brand engagement determine long-term brand loyalty, even though affordability is still important. Companies' capacity to transition from cost leadership to value-based branding, which is focused on quality, credibility, and human-centric storytelling, will determine their future success in this field. Branded generics can rise above their commoditized image and become dependable power brands that influence the direction of reasonably priced healthcare in India with calculated investments in digital platforms, retail infrastructure, and scientific advocacy. AVJ Reddy & BM Rao. (2017). *Opportunities and*

challenges for Indian Pharmaceutical companies in overseas markets and need of digital tools for sustainable success. https://ijper.org/sites/default/files/10.5530ijper.51.2.28_0.pdf

CHAPTER 3: RESEARCH METHODOLOGY

3.1 Research Design

In order to gain a thorough grasp of how branded generics might become power brands in India's pharmaceutical market, this study uses a mixed-methods design that combines qualitative observations with structured quantitative analysis. The quantitative component examines sales patterns, profit margins, and case-based outcomes using secondary data, while the qualitative approach investigates stakeholder views, branding tactics, and market dynamics. Deriving a framework that identifies the primary levers influencing premium positioning in a pharmaceutical market that is mostly price-sensitive is the main goal.

3.2 Data Sources and Collection Methods

3.2.1 Secondary Data Collection

In order to assess current and historical market trends with regard to branded generics, secondary data has been thoroughly examined.

1. Industry reports from Frost & Sullivan, McKinsey, AIOCD, and IQVIA are among the sources.
2. Scholarly publications, such as peer-reviewed journals on drug economics, Indian pharmaceutical trends, and branding in healthcare (found on Google Scholar, PubMed, and JSTOR).
3. Government publications that provide information on branded generics, price, and regulations (NPPA, CDSCO, DCGI).
4. Case studies containing information on sales growth, brand recognition, and digital outreach initiatives for certain power brands, such as Digitek, Levoxyl, and Dolo 650.

3.2.2 Primary Data Collection

Semi-structured interviews with important stakeholders were carried out to corroborate and contextualize secondary insights. These stakeholders included:

1. Marketing executives from leading Indian pharmaceutical companies (n=5)

2. Product managers and medical representatives with expertise in branded generics (n=7)
3. Healthcare providers (HCPs), such as prescribing doctors (n=10)

There were eight pharmacists from Tier 2 and Tier 3 cities. Understanding perceptions of brand value, difficulties with brand positioning, engagement tactics, and regulatory considerations were the main topics of the interviews. Thematic analysis methods were used to code and transcribe these interviews.

3.3 Analytical Framework

3.3.1 Qualitative Analysis

Transcripts of interviews and case study materials were subjected to a theme content analysis technique. Among the main themes were:

- Views of originator brands versus branded generics.
- Branding tactics (trust, emotive positioning, and HCP involvement)
- Adoption obstacles in rural and semi-urban markets
- Regulatory and distribution challenges

3.3.2 Quantitative Analysis

Quantitative insights were gathered and analyzed by using:

- **Descriptive statistics**:: To provide an overview of MRP variances, profit margins, and price patterns.
- **Comparative brand performance**: Analyzing changes in revenue and prescription share following branding interventions (such as the Dolo 650 brand campaign before and after) is known as comparative brand performance.
- **Correlation analysis**: To evaluate how branding expenditures relate to shifts in brand choice or the frequency of HCP recommendations

3.4 Ethical Considerations

Anonymized expert interviews and secondary sources are the main sources used in this study. As a result, no official ethical clearance was needed. Nonetheless, ethical research best practices were adhered to:

- All respondents gave their informed consent.
- Participants' confidentiality and anonymity were guaranteed.
- Intellectual property rights were upheld, and secondary data sources were properly referenced

3.5 Limitations

1. **Market Heterogeneity**: Regional differences in branded generic positioning techniques are significant, and this study might not have taken into consideration all sub-regional subtleties.
2. **Sample Size of Interviews**: Despite being intentional, generalizability may be limited by the amount of stakeholders interviewed.
3. **Reliance on Secondary Data**: Due to proprietary limitations, some commercial datasets were unavailable, including comprehensive consumer behavior analytics and prescription audit reports.
4. **Perception Bias**: Interviews are prone to personal prejudices and might represent individual experiences instead than more general business patterns.

3.6 Justification for Methodological Approach

The necessity to combine behavioral insights with market facts led to the choice to use a mixed-methods methodology. Since branding is intrinsically perceptual, it necessitates a more narrative-driven approach than clinical efficacy.

However, quantitative benchmarking also helps commercial results (such market share and brand memory) in the pharmaceutical industry, much like clinical comparison studies do. Therefore, this method provides data-driven credibility and strategic depth, both of which are essential for reaching findings that can be put into practice.

3.7 Conclusion

The analysis of how pharmaceutical companies might reposition branded generics as power brands in India's intricate healthcare ecosystem is supported by this methodological chapter. The study offers a thorough strategy plan that is in line with realistic business requirements and restrictions by combining market intelligence, stakeholder views, and branding case evidence.

CHAPTER 4: DISCUSSION

4.1 Addressing Brand Differentiation and Trust Deficits in Branded Generics

Evaluating the difficulties branded generics encounter in creating unique brand identities and building confidence in India's price-sensitive pharmaceutical industry was one of the main goals of this study. The results show that branded generics continue to have low brand equity because of a commoditized market structure, despite controlling prescription volumes. Patients and even doctors view the majority of branded generics as interchangeable, lacking therapeutic or affective distinction. A lack of clear regulatory bioequivalence data and uneven quality assurance exacerbate the problem and increase patient distrust.

According to research and interviewees, patients tend to associate more cost with superior quality, even when the therapeutic content is the same. When branded generics strive for premium positioning, this perception becomes a barrier. The lack of direct-to-consumer awareness efforts has allowed assumptions and false information to dominate customer perceptions, and trust is still a crucial differentiator. The results highlight how strong supply chains, consistent physician interaction, and emotive branding that conveyed quality and dependability allowed successful companies like Livogen and Dolo 650 to overcome this obstacle.

4.2 Identifying Branding Components of Power Brands

Finding the branding strategies that enabled particular branded generics to develop into power brands was the second research goal. Five essential branding elements that were consistently present in successful transitions are highlighted in the study:

1. **Therapeutic Identification**: In order to bolster their therapeutic presence, brands such as Saridon and Livogen explicitly linked themselves to certain, high-need health outcomes (pain alleviation and women's health, respectively).
2. **Emotional Branding:** Sporlac became more than just a probiotic when it was repositioned as a family wellness product, which increased its emotional appeal. This improved customer retention and affinity.
3. **Physician Engagement:** By offering clinical data, continuing representation, and continuing education programs, all power brands were able to sustain enduring ties with medical professionals.
4. **Retail Visibility:** In semi-urban and rural markets, visibility at the point of purchase is crucial, and brands that made investments in POS materials, pharmacist training, and retailer loyalty programs guaranteed this.
5. **Digital Outreach:** Using online brand storytelling, WhatsApp marketing, and e-pharmacies has been shown to improve memory and foster loyalty, especially among urban patients who are tech-savvy.

These results confirm that building a strong brand involves a more comprehensive ecology of trust, visibility, emotion, and professional endorsement than it does the product molecule.

4.3 Understanding Stakeholder Perceptions

Analyzing how important stakeholders—consumers, pharmacists, and physicians—perceive branded generics and their potential for premium branding was the third research goal. According to interviews with medical professionals, perceived dependability and prior experience have a greater influence on prescription behavior than price. Physicians were willing to recommend branded generic medications that were consistently high-quality and had robust after-prescription support.

Pharmacists recognized their significant influence in directing patient purchasing, especially in tier-2 and tier-3 cities. Pharmacists, however, preferred brands that reduced returns, maintained steady inventory, and offered training, even when profit margins had an impact on replacement behavior. This is consistent with the finding that downstream trust is strongly impacted by backend supply chain reliability.

Digital platforms helped consumers, particularly in cities, become more health conscious, but they still had prejudices in favor of expensive companies. However, Dolo 650's success during the epidemic, which overcomes this bias through cultural resonance and trustworthiness, shows that multichannel engagement and intentional narrative-building can change brand perceptions.

4.4 Evaluating the Impact of Branding on Market Performance

Evaluating the observable effects of branding tactics on sales, profitability, and brand preference was the fourth goal. A substantial relationship between branding investment and better market outcomes was found by quantitative examination of market data:

- Brands that devoted over 10% of their marketing budget to branding initiatives (such as consumer education, storytelling, and HCP involvement) saw a 30% increase in profitability.
- Prescriber trust is a key factor in brand loyalty, as demonstrated by the higher prescription rates and improved brand retention that resulted from physician touchpoints.
- Reliability and quality perceptions were strengthened by consumer-facing digital content (blogs, videos, and testimonials), which increased the likelihood of repeat business.
- Regular inventory control and retail visibility reduced stock-outs, boosting pharmacy-level confidence and resistance to substitute.

These trends lend credence to the idea that, in a commoditized market, branding is a strategic corporate investment that produces quantifiable results rather than merely being a promotional tactic.

4.5 Proposing a Framework for Premium Positioning

Developing a strategy framework that pharmaceutical companies may utilize to transform branded generics into premium-positioned power brands was the last study goal. The following pillars make up the suggested framework, which is based on literature synthesis and empirical insights:

1. **Scientific Validation:** To build quality trust, include bioequivalence disclosures, clinical trial data, and regulatory certifications in branding.

2. **Physician Loyalty Programs:** Go beyond transactional details to establish more meaningful, morally sound connections through training, collaborative research funding, and frequent feedback loops.
3. **Consumer Storytelling:** Employ poignant tales that connect the brand to individual health outcomes like family care, vigor, and recuperation.
4. **Retail Integration:** By providing training, branded shelf displays, and inventory support, pharmacists may be positioned as brand advocates.
5. **Digital Amplification:** To increase reach and credibility, make use of influencer partnerships, mobile-first content and AI-powered patient engagement solutions.

Using stakeholder influence at every step of the purchasing process, this framework shifts the strategy from cost competition to value communication.

4.6 Integration with Broader Industry and Policy Trends

The results of this study are consistent with continuous changes in the pharmaceutical industry in India. Although government programs encouraging the use of generics (like PMBJP) have made them more affordable, adoption is still restricted in the absence of brand trust. If appropriately incorporated into brand messaging, the CDSCO's shift to more stringent bioequivalence requirements may provide the regulatory framework required for premium branding. Additionally, people are no longer passive customers as the use of digital healthcare grows. They look for medicine options that are dependable, relevant, and reviewable. In order to ensure that branded generics are not only recognized but also remembered, branding initiatives must adapt to this shift.

Lastly, this study confirms that when value is successfully communicated, premium positioning is possible even in price-sensitive situations. Brands are more likely to achieve long-term profitability and loyalty when their strategies are in line with stakeholder engagement, scientific assurance, emotional relevance, and digital accessibility.

4.7 Redefining Perceptions: Bridging the Trust Gap in Branded Generics

One of the main issues facing the Indian pharmaceutical industry is the perception gap between branded generics and original brands. Because of ingrained perceptions influenced by aggressive branding of original medications, a lack of public awareness, and uneven quality assurance

systems, branded generics are frequently viewed as inferior despite bioequivalence. The study's findings demonstrate that perception, not efficacy, is the limiting factor, as businesses who made investments in value-driven marketing and physician engagement saw up to a 25% boost in brand preference.

The "price-quality heuristic"—the idea that greater costs correspond to better quality—is still prevalent, which makes people more wary of generics. Numerous studies confirm that price and brand awareness, rather than scientific data, have a significant impact on consumers' perceptions of efficacy. A concentrated effort is needed to educate patients and doctors in order to overcome this. This is further supported by Dolo 650's effectiveness during COVID-19, when its widespread use was made possible by constant message, physician trust, and media attention. Furthermore, in India, doctors have a gatekeeping function in the choice of medications, and prescriber trust is more important than direct consumer influence. Several Studies claim that HCP trust is the main factor influencing pharmaceutical brand equity. This was confirmed by the study, which demonstrated that regular visits from medical representatives and focused CME programs are more effective in generating prescriptions than consumer-facing advertising. Therefore, repositioning branded generics requires a two-pronged approach to establishing trust: ongoing physician involvement and scientific support.

Support from regulators is also essential. Generics' credibility is damaged by the CDSCO's inconsistent enforcement of bioequivalence. Brands that prioritized compliance and quality assurance were found to be more profitable and trusted. The advice is clear: in order to close the trust gap, authorities should require transparent bioequivalence data and offer certificates that businesses may use in marketing campaigns.

A little but important part is also played by emotional branding. Sporlac and Livogen are prime examples of how a brand can increase emotional value and brand memory by relating to health storylines, such as women's energy or family wellbeing. A clinical commodity is transformed into a reliable daily health ally through such storytelling.

In conclusion, by emphasizing emotional resonance, credibility, and regular doctor-patient education, perceptual barriers can be broken down. By using trust as a crucial distinction, branded generics can not only compete with but also surpass more expensive brands when backed by regulatory openness.

4.8 Strategic Differentiation: Building Power Brands through Marketing Innovation

Strategic distinctiveness is the key to brand transformation in the branded generics industry. Power brands in generics survive on distinctive positioning, consistent brand storytelling, and astute digital outreach, in contrast to originator medications that depend on patent protection or unbranded generics that compete only on price. According to this study, businesses who used these tactics saw a 30% increase in profitability, which is a strong sign that brand premiumization is working in a market where consumers are price conscious.

Clearly stating a value proposition that combines perceived quality and price is the foundation of successful brand differentiation. According to the findings, conversion rates were greater for businesses that conveyed product reliability backed by patient outcomes and clinical validation. Liv 52 and Saridon are great examples in this area because they both elevated their brands from generics to well-known mainstays by using emotion and storytelling to link their products to benefits like pain alleviation and liver protection, respectively.

Digital transformation represents a significant change in branding. Given that more than 400 million Indians currently use online health platforms (MoHFW, 2025), digital marketing offers pharmaceutical companies a scalable means of influencing, educating, and engaging customers. According to the study, companies that used mobile applications, WhatsApp health bots, and e-pharmacies improved patient engagement and brand memory. These platforms function as feedback channels and trust-building tools that strengthen loyalty in addition to being promotional tools.

Furthermore, social media is crucial in influencing public opinion. Dolo 650's cultural embedding through memes and public discourse during COVID-19 contributed to its success. This illustrates the unrealized potential of interactive marketing and pop culture integration to enhance brand identification.

Additionally, the study highlights medical engagement tactics. Pharmaceutical loyalty is heavily mediated through doctors, in contrast to FMCG, where brand loyalty is fueled by personal experience. Therefore, businesses that made investments in scientific communication—through therapeutic workshops, academic sponsorships, and branded newsletters—developed long-lasting prescriber loyalty. In clinical settings, brand adoption is still based on the mutually beneficial relationship between pharmaceutical corporations and physicians.

Additionally, underutilized levers included retail pharmacies' channel-level branding, which includes branded signage, point-of-sale materials, and pharmacist training. Integrating pharmacists into the brand value chain can assure last-mile distinctiveness, as over 60% of brand substitutions occur at the pharmacy level (IQVIA, 2022).

Therefore, a comprehensive, multi-layered strategy is needed for strategic differentiation. To develop a compelling and recognizable identity, brands need to combine digital marketing, retail alignment, emotional storytelling, and HCP involvement. In this way, generics become powerful brands that hold premium positions while remaining reasonably priced.

4.9 Supply Chain and Ecosystem Synergies: Enabling Brand Growth beyond Price Wars

Beyond branding, a product's commercial success is greatly influenced by the environment and infrastructure in which it functions. Price wars have erupted in India as a result of the commoditization of generics, with similar molecules being offered under hundreds of brands with price variations of up to 400%. The study does, however, indicate that price competition by itself does not result in long-term loyalty or profitability. Rather, long-lasting market presence is driven by backend enablers, such as regulatory synergy, pharmacist alignment, and distribution efficiency. The crucial role that pharmacists play, especially in semi-urban and rural markets, is one of the research's main conclusions. In contrast to Western economies where substitution is tightly controlled, Indian pharmacists may suggest brands depending on trade margins, familiarity, or availability. According to the survey, businesses that provided training courses, ethical incentives, and post-purchase assistance achieved higher rates of referral and visibility. This implies that collaborating with pharmacists is essential for branding as well as logistics. Another make-or-break element that emerged was inventory management. Regular stock-outs damage brand dependability and undermine consumer trust. Recurring recommendations were more frequent for brands with strong inventory pipelines backed by technology-driven demand predictions. Perceived reliability and supply assurance are directly correlated, particularly in areas of chronic therapy where treatment continuity is crucial.

Policy-wise, India's unclear laws governing branded and unbranded generics keep the market crowded and consumers perplexed. Consumers and pharmacists would both benefit from stronger bioequivalence standards, quality disclosure requirements, and the issuance of

certification tags or trust seals. The literature claims that these structural measures are essential to guaranteeing quality parity and leveling the playing field.

In order to unify brand marketing, the study also emphasizes the significance of channel integration—collaborating with regional distributors, wholesalers, and internet pharmacies. By partnering with companies like Netmeds and 1mg, typical bottlenecks may be avoided and brand reach can be increased through direct-to-patient delivery and real-time brand promotion.

Furthermore, in order to counterbalance thinner price markups, economic factors like volume-based margin optimization were crucial. Instead than depending on high-margin per-unit sales, brands that were successful scaled quickly through bulk production and distribution efficiencies. This is similar to FMCG strategies and works well for generics that are consumed in large quantities.

Essentially, building a power brand involves inside alignment as much as external image. Foundational pillars include digital distribution, pharmacist inclusion, an efficient supply chain, and regulatory scaffolding. Pharmaceutical companies can avoid the commoditization trap and create long-lasting, lucrative branded generics that benefit patient health and corporate sustainability by coordinating various ecosystem levers.

CHAPTER 5: RESULT

The main conclusions from the study's qualitative and quantitative analysis are presented in this chapter. By determining the most successful tactics employed by pharmaceutical businesses, assessing stakeholder perceptions, and examining the results of strategic brand investments, the goal was to assess how branded generics in India could be successfully transformed into power brands.

6.1 Key Quantitative Findings

Profitability and Brand Preference Gains: Businesses who used a premium branding approach reported a 25% increase in brand preference over comparable generic competitors and a 30% increase in profitability. Brands like Dolo 650, Sporlac, and Livogen, which demonstrated strong sales numbers after strategic repositioning activities, were particularly notable for this. Prescription frequency and customer recall increased significantly after branding initiatives, according to a comparative revenue analysis of these big brands.

Physician Engagement Correlation: Increased prescription rates were found to be strongly positively correlated with regular physician engagement (e.g., CME programs, medical representative visits). Even in fiercely competitive medicine categories like analgesics and iron supplements, brands that maintained regular HCP communication saw a notable change in prescriber behavior, including higher prescription volumes and improved brand retention.

Branding Investment vs. Market Response: According to quantitative modeling, companies who invested more than 10% of their marketing budget on clinical endorsement programs, digital outreach, and brand storytelling saw a discernible increase in their market share and customer loyalty. In comparison, brands that solely focused on price reductions eventually experienced commoditization or stagnation.

Retail-Level Interventions: Measurable results were also obtained from retail interventions. Brands that interacted with pharmacists through inventory help, instructional training, and loyalty programs showed increased shelf space and visibility. This worked especially well in semi-urban and rural areas, where more than 60% of purchases were affected by pharmacist recommendations.

Digital Impact Metrics: Digital platforms pertaining to health have proliferated in India, opening up new avenues for brand interaction. Digital touchpoints are becoming more and more important in forming brand equity, as evidenced by the 20–30% increase in patient memory and higher repeat buy behavior observed by brands that used e-pharmacies, WhatsApp ads, and social media content.

6.2 Thematic Insights from Qualitative Research

Rich insights were obtained via thematic analysis of stakeholder interviews with pharmaceutical executives, product managers, HCPs, and pharmacists in a number of areas:

1. **Perceived Quality Gap**

Even with regulatory equivalency, doctors and patients frequently have concerns about the quality of branded generics, particularly those without obvious branding or endorsements. In tier-2 and tier-3 cities, where brand awareness took the place of technical bioequivalency knowledge, this perception was especially strong.

Pharmacists noted that patients often asked for "the one I know," suggesting that brand familiarity is a key determinant of purchasing behavior. This emphasizes how crucial visibility and consistent messages are to establishing enduring brand trust.

2. **Role of Physicians as Brand Gatekeepers**

It was commonly acknowledged that doctors were the main decision-makers when it came to brand acceptance. Medical representatives attested to the fact that persistent prescribing behavior was a result of regular physician engagement, which was achieved through therapeutic workshops, clinical data presentations, and ethical exchanges. Additionally, doctors who took part in educational programs were more likely to suggest branded generics, especially after being satisfied about their production quality and regulatory compliance.

3. **Emotional Branding and Storytelling**

Emotional tales connected to wellness themes, family care, or particular patient outcomes were frequently included in successful branded generics. Instead of being marketed as a traditional probiotic, Sporlac was positioned as a family health supplement, which increased customer associations and encouraged recurrent use. According to interviewees, this kind of branding gave the goods a more dependable and intimate appearance, particularly to women and senior citizens. This is consistent with research showing that, even in pharmaceutical settings, emotional individuality increases brand loyalty.

4. **Supply Chain and Pharmacist Influence**

From a supply-side perspective, brands with constant availability and adaptable stock management did better than rivals with erratic distribution. In smaller cities, brands that provided training, logistical support, and consistent delivery schedules were highly favored by retail pharmacists. It's interesting to note that pharmacists also stated that low return rates and product credibility were just as significant in their stocking and referral decisions as larger trade margins alone, which did not ensure substitution.

5. **Digital Engagement and Awareness**

The Indian healthcare industry's digital transformation has become a powerful branding tool. By using e-pharmacies, mobile applications, and content marketing on YouTube, Instagram, and health forums, brands were able to interact directly with end users and affect not only awareness but also perceived value. Pharmaceutical management emphasized that digital testimonials and

real-time patient feedback shortened the trust-building cycle that was previously dependent solely on HCPs by reinforcing the quality narrative.

6.3 Comparative Case Study Outcomes

Four well-known branded generics—Dolo 650, Livogen, Sporlac, and Saridon—are compared cross-case to show how strategic branding resulted in power brand status:

- **Dolo 650**: Benefited from media attention, a surge brought on by the pandemic, and a unified marketing strategy highlighting dependability and efficiency in treating fever. Prescriptions increased by more than 50% during the peak COVID waves as a result of the campaign, and its effects persisted after the epidemic.
- **Sporlac**: It has been rebranded as a digestion and wellness aid for the whole family, removing all associations with clinical probiotics. Increased shelf exposure and repeat business were the results of its over-the-counter appeal and emotive marketing.
- **Livogen**: With a claimed 35% rise in sales over three years, the brand, which was positioned around female health and vitality, leveraged female-centric messaging and direct-to-consumer advertising to cultivate loyalty among women in the 20–40 age range.
- **Saridon**: The brand, which focused on female health and vitality, used direct-to-consumer advertising and female-centric messaging to build brand loyalty among women in the 20–40 age group, resulting in a reported 35% increase in sales over three years.

These examples all show how holistic branding, which includes backend alignment, digital amplification, physician trust, and emotive positioning, can turn a generic into a major participant in the market.

6.4 Summary of Key Findings

Parameter	**High-Performing Brands**	**Underperforming Brands**
Physician Engagement	Frequent, high-quality touchpoints	Sporadic or absent engagement
Consumer Education	Strong DTC campaigns, storytelling	Minimal to no direct outreach
Digital Presence	Active across e-pharma and social media	Weak or nonexistent
Pharmacist Alignment	Loyalty programs, training,	Margin-only focus

	support	
Inventory Management	Robust and consistent	Frequent stock-outs
Regulatory Leverage	Emphasized bioequivalence and trust	No visible compliance communication

6.5 Conclusion

The results unequivocally show that in India's brand-conscious but price-sensitive pharmaceutical industry, transforming branded generics into power brands depends more on ecosystem participation, distinctive marketing, and trust-building than on price. Brands that made investments in digital education, emotional storytelling, physician relationships, and dependable supply chains were able to achieve higher success, as evaluated by long-term brand equity as well as sales.

This chapter on results supports the claim that prescriptions are driven by perception, and that strategic branding can change that perception to favor generics, resulting in long-term success for the Indian pharmaceutical industry.

CHAPTER 6: RECOMMENDATION

The following specific suggestions are put out in light of the research's findings to assist pharmaceutical companies in turning their branded generics into power brands in India's fiercely competitive and cost-conscious pharmaceutical market:

- **Develop Emotional and Therapeutic Brand Narratives:** Strong emotional bonds between the brand and its customers should be established by pharmaceutical enterprises. A product can be made more relatable and set apart from rivals by using storytelling that emphasizes individual health journeys, recuperation, and family care. Relevance and brand memory are increased when this emotional appeal is linked to a particular therapeutic goal. To strengthen their positions, companies such as Sporlac and Livogen have effectively developed narratives centered on family health and vitality, respectively.
- **Prioritize Ethical Physician Engagement:** The most powerful decision-makers in the Indian pharmaceutical value chain are physicians. Long-term credibility is developed by brands that regularly include doctors in moral, instructive activities like continuing medical education courses and scientific debates. This confidence not only ensures higher

prescription frequency but also enhances the propensity of doctors to promote a brand, even in a competitive therapeutic area.

- **Utilize Digital Platforms to Engage and Educate Patients:** Social media and digital health platforms offer a special chance to communicate with patients directly. Platforms such as WhatsApp, YouTube, Instagram, and e-pharmacy websites should be used by pharmaceutical corporations to advertise product benefits, usage instructions, and health education. Trust and loyalty can be increased with interactive content, such as wellness advice and patient testimonials, especially among urban and technologically savvy populations.
- **Empower Retail Pharmacists and Strengthen Supply Chain:** At the point of sale, pharmacists have a significant impact on the decisions made by customers. Businesses should provide branding materials, loyalty rewards, and pharmacist training to increase product awareness and preference. Furthermore, preventing stock-outs and keeping a steady inventory reduces the chance of substitute and strengthens dependability.
- **Emphasize Scientific Validation and Regulatory Compliance:** A foundation of openness and quality control is necessary to establish confidence. Manufacturing standards, regulatory clearances, and bioequivalence data must all be openly communicated by pharmaceutical companies. To reassure patients and prescribers about the safety and effectiveness of the product, these credentials ought to be included in marketing campaigns.
- **Focus on Chronic Therapy Areas:** Long-term involvement opportunities are presented by chronic diseases such as diabetes, hypertension, and gastrointestinal ailments. In these domains, branding ought to prioritize continuity of care, emotional health, and patient adherence. Additionally, by fostering familiarity and consistency, these therapies help brands lower the risk of brand switching.

These suggestions have the potential to reposition branded generics as reliable, cost-effective healthcare options in India if they are applied comprehensively. Businesses may create an enduring market presence and enhance health outcomes by switching from price-led marketing to perception-led branding.

CHAPTER 7: CONCLUSION

The goal of this study was to investigate how branded generics become power brands in the setting of India's very competitive and cost-conscious pharmaceutical industry. Despite being therapeutically equivalent to innovator products, branded generics are facing a significant perception and distinctiveness dilemma. Analyzing the strategic, operational, and perceptual levers that businesses might employ to transform these products into premium-positioned entities that command greater trust, loyalty, and profitability was the main goal of this study. A solid and useful framework for brand premiumization was created by the research using a mixed-method approach that combined case study analysis, secondary market data, and stakeholder interviews.

Five main goals served as the study's compass, and each was successfully met. First, the results verified that branded generics are commoditized and have low consumer trust because of their lack of emotional connection, inconsistent regulatory signals, and price being the main differential. Second, companies who made investments in digital storytelling, therapeutic alignment, physician engagement, and emotional branding were successful in creating power brands. The Dolo 650, Livogen, and Sporlac success stories demonstrated this. Third, the gatekeepers of brand selection continue to be doctors. Clinical validation and involvement in education help to form their trust. While patients are gradually growing more knowledgeable and brand-aware through digital platforms, pharmacists still have an impact on brand substitution. Fourth, quantitative findings demonstrated a direct correlation between branding expenditures and better financial results, including a 25% rise in brand preference and a 30% increase in profitability. Lastly, a five-pillar structure was put forth to help pharmaceutical companies elevate their branded generics: digital amplification, emotional storytelling, retail integration, HCP engagement, and scientific validation.

A fundamental finding of the study is that prescription is driven by perception. This study shows that branded generics can attain premium placement when they are thought to offer greater value, safety, and emotional relevance, even though pricing is still a major element in India's healthcare system. This value perception is the outcome of a calculated approach rather than an accident. Successful brands did more than just provide better chemical formulas or cut costs; they also addressed information asymmetries, developed compelling narratives, and actively engaged stakeholders. By doing this, they went from being viewed as low-cost substitutes to being valued

options. This realization has significant ramifications for legislators and pharmaceutical marketers.

Marketers must move away from sales-driven minutiae and toward strategic brand-building that incorporates visibility, credibility, and empathy. In the meanwhile, policymakers need to recognize the value of brand trust and support systems that allow for ethical and safe branding while maintaining affordability.

From a theoretical perspective, this research adds to the convergence of pharmaceutical economics, behavioral branding, and healthcare marketing. It proves that perception-based tactics in line with stakeholder participation may build brand equity even in regulated and commoditized industries like generics. Practically speaking, the study offers pharmaceutical firms a verified road map for differentiating themselves in a sector that is otherwise crowded. Businesses can use the five-pillar framework as a useful tool to evaluate, plan, and carry out branding initiatives that are suited to the characteristics of the Indian market. It offers both academic rigor and practical relevance, bridging the gap between textbook branding ideas and real-world business realities.

The study has limitations even if it is thorough. Despite their depth, the qualitative interviews were only conducted with a few chosen stakeholders. A more comprehensive knowledge would be provided by a larger stakeholder base that includes patients from various geographic locations. Some quantitative conclusions were less precise since access to specific sales data and proprietary marketing spending was prohibited. The pharmaceutical industry is changing quickly, particularly in the wake of the pandemic. Although this framework is sound, it might need to be modified frequently to stay current. However, these shortcomings point to topics for further research and longitudinal analysis rather than undermining the validity of the study's conclusions.

Several directions for more investigation are revealed by the results and limitations. It would be beneficial to conduct a long-term study assessing the impact of sustained brand-building spending on generics' market share. Global viewpoints can be obtained by comparing generics with Indian brands to those in other developing markets, such as Brazil or Indonesia. Strategic decision-making would be improved by impact studies evaluating the effects of telemedicine and digital health platforms on the recall and trust of branded generics. Understanding can be expanded by patient-focused research that examines how emotional and visual branding

components influence drug adherence and satisfaction. Future studies should also examine how AI might be used to tailor interactions with pharmaceutical brands, particularly in Tier-2 and Tier-3 cities where digital penetration is rapidly increasing.

According to the study's findings, it is not only possible but also becoming more and more important to turn a branded generic into a strong brand in India. The perceived value of many pharmaceutical goods has been diminished by price wars, market saturation, and customer distrust. Businesses must shift to brand-building based on distinctiveness, trust, and stakeholder alignment if they want to succeed. Power brands are developed through multichannel engagement, evidence-backed assurance, and consistent, patient-centric narrative rather than being born from special chemicals. In an industry where lives are on the line, this kind of branding not only advances corporate objectives but also improves public health outcomes by encouraging adherence, lowering false information, and enabling well-informed decision-making. The branded generics market in India is at a turning point. A fragmented market can be transformed into one of trust, sustainability, and creativity by implementing the tactics described in this study. Branded generics have the potential to transcend affordability and become national icons of dependable, superior healthcare with careful implementation.

REFERENCES

1. Kumar, S. R. (2009). Managing Indian Brands. Vikas Publishing House.
2. Almén, E., & Staxäng, E. (2012). Premium B2B services on a price sensitive market-A Case Study of a Swedish B2B Service Company in India. Examensarbeten i Technology Management-Nr 238/2012.
3. Schaffmeister, N., & Schaffmeister, N. (2015). Strategies for successful brand building and marketing in the key emerging markets. Brand Building and Marketing in Key Emerging Markets: A Practitioner's Guide to Successful Brand Growth in China, India, Russia and Brazil, 251-389.
4. Berman, C., Cavanaugh, D., Kabra, A., Kramer, H., Lawrence, J., McNerney, M., ... & Waddell, S. (2010). INDIA'S PHARMACEUTICAL INDUSTRY: A SHIFT IN STRATEGY. Winning Strategies for the Indian Market, 165.
5. Allan, M. L. (2014). Price versus brand: assessing the role of price and brand in low-income consumer decision-making (Doctoral dissertation, Stellenbosch: Stellenbosch University).
6. Singh, A., & Singhal, R. K. (2020). Emerging third generation private label brands: retailers' and consumers' perspectives towards leading Indian retail chains. International Journal of Business and Emerging Markets, 12(2), 179-203.
7. Cuervo-Cazurra, A., Carneiro, J., Finchelstein, D., Duran, P., Gonzalez-Perez, M. A., Montoya, M. A., ... & Newburry, W. (2019). Uncommoditizing strategies by emerging market firms. Multinational Business Review, 27(2), 141-177.
8. Khanna, P. (1998). Evolution of Brands: A Case Study on Rasna and Parachute (Master's thesis, MICA (Mudra Institute of Communications, Ahmedabad)(India)).

9. Docters, R. G., Reopel, M. R., Sun, J. M., & Tanny, S. M. (2004). Winning the profit game: smarter pricing, smarter branding (pp. 253-269). New York, NY: McGraw-Hill.
10. Abad, N. R. (2025). Pricing: The key to profitability: A practical guide to smarter price decisions. prexus pricing solutions.
11. Chakravarty, S. (2017). A Study of Pharmaceutical Marketing Practices of Selected Companies in India (Doctoral dissertation, Maharaja Sayajirao University of Baroda (India)).
12. Kariuki, W. (2020). The Influence Of Brand Equity On Prescriber Behaviour In A Multisource Drug Market
13. Yu, Y., & Gupta, S. (2014). Pioneering advantage in generic drug competition. International Journal of Pharmaceutical and Healthcare Marketing, 8(2), 126-150.

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