INTERNSHIP AT WINGLOBE , DELHI

"“Evaluation of Trends in the Indian Medical Device Market”

Guided by:

Mr. RAHUL SHARMA
Associate Professor

School of Pharmaceutical Management

IIHMR University, Jaipur

Submitted by: NEEL SISODIA
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Internship Organization: Winglobe Health care pvt ltd

1. Introduction

India’s medical device sector has evolved into one of the fastest-growing segments within the healthcare ecosystem. The country’s rising population, increased healthcare awareness, and government support for domestic manufacturing (such as the Make in India initiative) have contributed to the expansion of this sector. The purpose of this study is to evaluate current trends, challenges, opportunities, and policy frameworks shaping the Indian medical device market.

The Indian market is heavily reliant on imports for high-end devices, while domestic manufacturers focus more on low-cost consumables and diagnostic equipment. However, recent policy interventions and pandemic-induced disruptions have accelerated innovation, investments, and local production efforts.

2. Research Questions

- What are the key trends driving the growth of the Indian medical device market?
- How does the market balance between imported and indigenous devices?
- What government initiatives are contributing to the sector's growth?
- What are the perceptions of healthcare professionals regarding local vs imported devices?

3. Literature Review

Before starting the internship, I explored:

- Classification of medical devices as per CDSCO and WHO standards.
- Market reports by IBEF, Deloitte, and NPPA indicating CAGR and market potential.
- India’s import dependence (~70–80%) and PLI schemes to promote local production.
- Emerging areas such as AI-enabled diagnostics, wearable health devices, and MedTech startups.

4. Objectives

- To analyze current and emerging trends in the Indian medical device industry.
- To evaluate market size, key players, and investment flows.
- To assess policy frameworks supporting domestic manufacturing and innovation.
- To gather primary insights from professionals in the medical device ecosystem

5. Hypothesis

- Null Hypothesis (H_0): There’s no real gap between classroom knowledge and industry practice.
- Alternative Hypothesis (H_1): There is a gap between what we learn theoretically and how things are done practically.

6. Data Collection Procedure

- **Primary Data:** A structured questionnaire was used to survey 50 stakeholders including doctors, technicians, and distributors.
- **Secondary Data:** Government portals, market intelligence reports, journal articles, and company websites.

7. Study Design

This was a mixed-method, descriptive study combining qualitative and quantitative insights. It involved: Market scanning and trend analysis , SWOT and Porter's Five Forces analysis, Primary survey for real-world perception, Data synthesis and interpretation.

This was a descriptive, observation-based study. I spent five weeks at Winglobe, working with different teams and seeing each stage of the ESU lifecycle—from assembly and calibration to field demos and servicing.

8. Duration of Study

- Total duration: 7 weeks
- Average engagement: 6–8 hours per day
- Activities included office-based work, lab exposure, and hospital visits

9. Sample Size

- Around 20 ESU units were handled or observed.
- Interacted with over 10 professionals (engineers, QA experts, R&D team).
- Visited 3 hospitals for real-world product demonstrations and installations.
- Ligapro – 13 & 23 – Open Surgery , 33 & 44 – Lap Surgery

10. Primary Data

The key information came from real-time observations, team discussions, customer feedback, and calibration logs. I tried to absorb both the technical side and the workflow/processes used in the company.

11. Operational Definitions

- ESU: A medical device that uses high-frequency electricity for cutting or coagulating tissue.

- REM: A safety system that checks if the patient's grounding pad is properly placed and working.
- Calibration: Adjusting a device to ensure it meets performance standards and gives accurate output.

12. Ethical Considerations

All my work was done under the guidance of company mentors. I made sure not to share any sensitive or proprietary information. I respected patient privacy during field visits and followed all internal protocols.

13. Implications of the Study

This internship showed me the real-world side of biomedical devices—something you can't fully learn from books. It highlighted where education and practice sometimes don't align, and why practical exposure is so important. It also showed how small improvements in documentation, training, and servicing can make a big difference in quality and safety.