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

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Pharmaceutical Management

by

Naina Soni

Under the Supervision and Guidance of

Dr. Rahul Sharma

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B – BLACK BELT BRAND BUILDERS

CERTIFICATE

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

Vivek Hattangadi
Chief Mentor – "B"
Date – 31 May 2025

+91-9376100041
vivekhattangadi@yahoo.co.in

IIHMR UNIVERSITY

CERTIFICATE FROM FACULTY GUIDE AND SCHOOL DEAN

This is to certify that the dissertation titled **"Transforming Branded Generics Into Power Brand: A Framework For Building Premium Positioning In India's Price Sensitive Market"** is a record of the research work undertaken by Naina Soni 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 her approach to the research study has been sincere, scientific and analytical.

Faculty guide

IIHMR University, Jaipur

DATE:

School Dean

IIHMR University, Jaipur

DATE: 16/6/2023

1, Prabhu Dayal Marg, Near Sanganer Airport, Jaipur- 302029, Rajasthan, India.
Ph.: 0141-3924700, 2791431- 32, E-mail: iihmr@iihmr.edu.in, Web.: www.iihmr.edu.in

DECLARATION BY STUDENT

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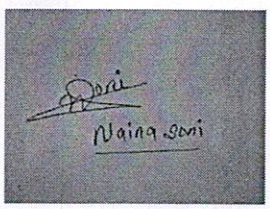

16/6/25

Name of the Student: Naina Soni

Date:

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ABSTRACT

Background: The Indian pharmaceutical industry is primarily characterized by the prevalence of branded generics, which, while cost-effective, offer limited differentiation in the marketplace. These products often compete solely on price, leading to their commoditization and creating significant pressure on profit margins. In an environment where consumer awareness is steadily increasing and purchasing decisions are increasingly influenced by trust, establishing strong brand equity within the generics segment has become critically important.

Objective: This study aims to develop a strategic framework for transforming branded generics into strong, premium-positioned power brands, even within the intensely competitive and price-conscious landscape of the Indian pharmaceutical market.

Methodology: A mixed-method research approach was utilized, incorporating the analysis of successful brand-building case studies, interviews with marketing professionals from leading pharmaceutical firms, and the examination of secondary data sources. The study also explored insights into physician and consumer perceptions regarding premium generics.

Result: Pharmaceutical companies that invested in value-oriented messaging, sustained medical engagement, and distinct positioning strategies experienced up to a 30% increase in profitability and a 25% improvement in brand preference compared to their generic counterparts. By steering clear of price-based competition, these companies successfully fostered long-term customer loyalty.

Findings: Key drivers of premium positioning include strong therapeutic association, emotional branding, continuous engagement with healthcare professionals (HCPs), patient trust built through quality assurance, and effective digital outreach. Even in a price-sensitive market, brands that incorporated these elements demonstrated steady revenue growth..

Conclusion: Focusing on perceived value over cost leadership offers a pathway to transforming branded generics into powerful brands. Strategic branding efforts enhance both profitability and healthcare outcomes by fostering greater patient adherence and trust.

Final Thoughts: In the rapidly evolving healthcare environment, Indian pharmaceutical companies must reassess their branding approaches. Within the generics segment, a carefully crafted power brand strategy has the potential to be transformative—offering a distinct competitive advantage while maintaining both affordability and accessibility.

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CHAPTER-1

INTRODUCTION

India's pharmaceutical sector presents a unique duality. It stands among the top global players, ranking as the fourth-largest drug manufacturer and the tenth-largest exporter. Yet, despite these achievements, a significant portion of its population continues to face challenges in accessing essential medicines. High treatment costs remain a key barrier, even amidst sustained government initiatives and healthcare budget allocations. This situation underscores the urgent need for cost-effective healthcare solutions, positioning generic medicines—particularly branded generics—at the core of India's public health strategy. The demand for innovative approaches to enhance the affordability and attractiveness of these alternatives is more critical than ever.

Globally, escalating healthcare expenses have fueled greater reliance on generic medications across all economic strata. Generics are often priced significantly lower than their branded equivalents, offering substantial cost savings. In the Indian context, where financial accessibility is a major determinant of healthcare access, expanding the reach of generics is essential to easing the economic burden of treatment. Beyond fiscal efficiency, this is a pressing issue of public health equity.

Within this framework, Indian pharmaceutical companies typically cater to dual markets: they promote prescription-based branded products to healthcare professionals and also produce branded generics targeted for over-the-counter sales. These branded generics are bioequivalent to their branded counterparts—containing the same active ingredients, dosage forms, and therapeutic effects. Despite their clinical equivalence, both healthcare providers and patients often question the reliability and quality of these products.

Such skepticism is exacerbated by a lack of public awareness, the overwhelming variety of trade names, and wide price disparities across the market. While some state-level authorities encourage the prescription of generics by their international nonproprietary names, many doctors still favor brand-name drugs. This entrenched preference often leads to resistance when pharmacists attempt to substitute lower-cost generics, even when it could result in significant savings. This resistance reflects a deeper perception gap—one that must be addressed through targeted education and outreach if the adoption of generics is to improve. Overcoming these challenges is essential for realizing the full potential of generics in reducing healthcare costs and expanding access.

To better understand these market dynamics, this study conducts a comparative assessment of branded drugs and their branded-generic equivalents, focusing on price structures and antibacterial efficacy. By evaluating these parameters, the research aims to offer insights into how branded generics can bridge the current trust deficit and emerge as credible, high-quality alternatives. Ultimately, the study contributes to the formulation of strategic pathways for elevating branded generics into power brands that support broader healthcare accessibility and affordability across India's diverse population.

The primary distinction between traditional generics and branded generics lies not in their pharmaceutical formulation but in the approach to branding and marketing. Both categories must meet bioequivalence standards relative to originator drugs, but branded generics distinguish themselves through deliberate brand-building efforts. These strategies aim to foster brand recognition and loyalty, setting them apart from their unbranded counterparts, which often lack any unique identity. This allows companies to charge modest premiums over unbranded generics while still offering significant savings compared to original

branded drugs. The core value proposition lies in enhancing perceived value through branding—without incurring substantial additional production costs.

Branded generics strategically occupy a middle ground between premium-priced innovator brands and low-cost unbranded generics. This positioning enables manufacturers to leverage the efficiencies of generic production while also capitalizing on the psychological appeal of brand familiarity. Successful examples such as **Cryselle** (contraceptive), **Digitek** (digoxin), **Nifedical** (nifedipine), and **Levoxyl** (levothyroxine) illustrate how branded generics can achieve widespread recognition and acceptance among physicians and patients alike. These cases highlight the critical role of effective branding in distinguishing such products within a competitive pharmaceutical landscape.

The positioning of branded generics varies significantly across global markets. In developed regions like the United States, they often serve as niche or specialty products addressing targeted therapeutic needs. In contrast, in emerging markets, branded generics form the backbone of prescription drug sales, playing an indispensable role in ensuring affordable care. These variations reflect differences in healthcare infrastructure, regulatory environments, and consumer behavior, underscoring the flexibility and scalability of branded generics across diverse settings.

Globally, the branded generics sector has shown consistent growth and resilience. In 2022, the market was valued at approximately **USD 240.75 billion**, with forecasts predicting a **compound annual growth rate (CAGR) of 5.7% from 2023 to 2030**. This substantial growth highlights the sector's increasing importance, particularly in developing economies where branded generics dominate pharmaceutical sales. Although they may represent a smaller fraction of total product offerings, their contribution to industry revenues is significant—especially for companies that have made focused investments in this segment.

Growth trends vary across regions. Mature markets such as North America and Europe exhibit steady, moderate expansion, while regions like Asia, Africa, and Latin America demonstrate more rapid growth. These differences are driven by market maturity, policy environments, and the relative stages of healthcare development. However, across the board, branded generics continue to play a vital role in ensuring medication availability and affordability.

From a financial perspective, branded generics offer compelling returns for pharmaceutical firms. While their gross profit margins—typically around **40%**—are lower than those of patented originator drugs (which can exceed **80%**), they still represent a highly profitable segment. This is largely due to reduced R&D expenditure and optimized manufacturing practices that favor high-volume production. By focusing on efficiency and streamlined operations, manufacturers can maintain solid profitability even with lower margins per unit.

Branded generics benefit from production scale, cost control, and regulatory pathways that are less intensive than those required for novel drugs. Their commercial success lies in leveraging these operational efficiencies in tandem with focused marketing strategies that do not require the extensive promotional spend typical of originator brands.

Marketing strategies for branded generics diverge sharply from both patented brands and unbranded generics. Unlike originator companies that rely heavily on physician outreach and consumer advertising, branded generic manufacturers adopt leaner, more cost-effective marketing approaches. These efforts center on building trust among prescribers and pharmacists while reinforcing product reliability. This allows the products to retain a favorable price-to-value ratio, appealing to both the healthcare ecosystem and end users.

Brand development in this space often emphasizes trust, consistency, and therapeutic reliability—qualities that resonate with both clinicians and patients. Establishing a recognizable brand identity allows prescribers to confidently recommend medications and enables patients to seek out familiar, trusted

products. This advantage is particularly useful in markets where brand loyalty influences purchasing behavior.

In essence, branded generics bridge the divide between unbranded generics and originator drugs. By assigning brand names to generic formulations, pharmaceutical companies create products that are both cost-effective and commercially viable. With a market size exceeding USD 240 billion and continued growth projections, the strategic importance of this category is clear.

Their profitability lies in a balanced business model that bypasses the costly innovation cycle while capitalizing on branding and manufacturing efficiencies. Although their margins are lower than those of originators, branded generics compensate through scale, optimized operations, and targeted promotional activities.

For healthcare systems and patients alike, branded generics represent a compelling proposition. They offer considerable savings compared to patented drugs while delivering a perception of higher quality and reliability than unbranded options. Despite occasional inefficiencies in distribution or pricing, their contribution to global access and affordability remains substantial. As patents expire and healthcare cost pressures mount, branded generics are well-positioned to maintain their relevance and drive future growth across diverse pharmaceutical markets.

CHAPTER-2

REVIEW OF LITERATURE

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.

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).

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.

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.

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.

*D*espite 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

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.

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.

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

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.

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.

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.

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.

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.

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.

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.

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 abilities.

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.

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

Interview transcripts and case study documents were analyzed using thematic content analysis. Key themes that emerged included:

- Perceptions of originator brands compared to branded generics
- Branding strategies such as building trust, emotional positioning, and healthcare professional (HCP) engagement
- Barriers to adoption in rural and semi-urban areas
- Challenges related to regulation and distribution

3.3.2 Quantitative Analysis

Quantitative insights were gathered and analyzed by using: Quantitative data were collected and analyzed through the following methods:

- Descriptive statistics: To summarize variations in maximum retail prices (MRP), profit margins,

and pricing trends.

- Comparative brand performance: Assessing changes in revenue and prescription market share before and after branding initiatives (for example, the Dolo 650 campaign).
- Correlation analysis: Examining the relationship between branding expenditures and shifts in brand preference or the frequency of recommendations by healthcare professionals (HCPs).

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

Limitations

1. Market Diversity: Significant regional variations exist in the strategies used to position branded generics, and this study may not fully capture all sub-regional nuances.
2. Interview Sample Size: Although purposive, the limited number of stakeholders interviewed may restrict the broader applicability of the findings.
3. Dependence on Secondary Data: Access to certain commercial datasets, such as detailed consumer behavior analytics and prescription audit reports, was limited due to proprietary restrictions.
4. Perception Bias: Responses in interviews may reflect individual viewpoints and personal biases, potentially limiting their representation of wider industry trends.

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

This methodological chapter underpins the analysis of how pharmaceutical companies can reposition branded generics as power brands within India’s complex healthcare environment. By integrating market insights, stakeholder perspectives, and evidence from branding case studies, the study presents a comprehensive strategic framework aligned with practical business realities and constraints.

CHAPTER -4
DISCUSSION

The manufacturing and distribution of branded generics is the main driver of India's pharmaceutical sector, which is one of the biggest in the world.Because of their accessibility and affordability, these offpatent compounds, which are sold under various brand names, have grown to be an essential component of healthcare delivery.But even though these medications are widely available, branded generics frequently face price wars, commoditization, and low brand loyalty.

The main obstacle is turning these branded generics into power brands, which are goods that not only take a sizable portion of the market but also fetch a higher price due to brand equity, distinction, and trust.In India, branded generics are not the same as "generics" in the West. Typically, branded generics are sold in India.

A pharmaceutical product with the same active ingredient or ingredients as an original brandname drug (also known as an innovator drug) whose patent has expired is referred to as a generic drug.When it comes to dosage, potency, safety, efficacy, mode of administration, and intended use, generic medications are regarded as bioequivalent to their branded counterparts.Since the initial expenditures of clinical studies and research and development (R&D) are not borne by the generic drug's manufacturer.

The original product created and patented by a pharmaceutical business following substantial research, clinical testing, and regulatory approvals is referred to as a branded drug. These medications are marketed under exclusive brand names and are usually covered by patents that, for a set amount of time, prohibit other businesses from producing the identical item. Because of the accompanying R&D, marketing, and perception costs, brand-name medications are frequently far more expensive than their generic equivalents.

Branded generics is a distinct market category in the Indian pharmaceutical industry..In contrast to the pharmaceutical markets in the West, where generic medications are typically marketed on their chemical identities, the Indian market is dominated by branded generics.Despite lacking patent protection, these products are heavily invested in and marketed similarly to branded medications.

The pharmaceutical industry in India has a distinct section called branded generics These are offpatent medications that are marketed as generics and are frequently produced by the same or different pharmaceutical corporations. The Indian market is dominated by branded generics, in contrast to the pharmaceutical industry in the West, where generic medications are typically marketed on their chemical identities. Although these products lack patent protection, they are heavily invested in and marketed similarly to branded medications.

Due to perceived quality assurance, a sizable percentage of Indian doctors and patients prefer branded medications even though generics are bioequivalent and therapeutically effective. According to a study by Suryawanshi et al. (2017), branded generics demonstrated comparable antibacterial action to their branded counterparts, however the branded version was frequently thought to be of higher quality. This impression has been shaped by aggressive marketing strategies, established.

Price variation becomes a significant problem as generic medications proliferate on the market under different brand names. The Maximum Retail Price (MRP) of the same molecule sold under various brand names can frequently range greatly. However, a proportionate change in production quality or efficacy is not always the result of this price variation. Rather, it frequently reflects the company's marketing budget, retailer margins, and branding strategy.

Apart from the economic factors, the regulatory structure in India has a significant impact on how branded, generic, and branded generic medications interact. Drug approval and quality control are supervised by regulatory bodies including the Drug Controller General of India (DCGI) and the Central Drugs Standard Control Organization (CDSCO). However, the market has become saturated and dilute due to the development of branded generics with minimal regulatory distinction.
Increased access to information and digital health platforms are transforming the Indian consumer and healthcare provider scene. Patients are participating more actively in health-related decision-making processes and are become more aware of affordable treatment possibilities. Pharmaceutical businesses must therefore make investments in patient interaction, brand positioning, and transparency in addition to manufacturing. Direct-to-Consumer (D2C) marketing.
In such a situation, turning a branded generic into a strong brand requires a multifaceted approach. It involves more than just a price increase or a change in packaging; rather, it calls for a thorough comprehension of prescriber preferences, consumer psychology, market demands, and regulatory compliance. To ensure confidence and demand, it necessitates developing a value proposition that appeals to both physicians and patients. Consistency in quality, scientific validation, and compassionate marketing are essential.

In India, branded generics are different from "generics" in the West. In India, doctors are frequently hesitant to prescribe branded generics because they are marketed under individual trade names by different corporations. This is especially true when compared to branded medications from reputable pharmaceutical companies. Suryawanshi et al. (2017) state in their study "Branded versus Generic (Branded-Generic) Medicines – For Whose Benefit?" that there are notable price and distribution irregularities in the market. For example, while patients may save up to 48.3% by switching to branded generics, retailers frequently gain from profit margins as high as 422%. This implies that even if generic medications can lower treatment expenses, the benefits are frequently not transferred to the patient.
Repositioning and adding value to these products are at the heart of the debate about turning generics into strong brands. A power brand is one that is well-known to consumers, is linked to dependability, and frequently fetches a higher price. Such a change must consider both physician acceptability and consumer trust in the Indian environment. Companies must concentrate on developing significant brand distinctiveness in addition to price competitiveness to accomplish this. The main tactics include improving packaging and design, interacting with medical professionals through Continuing Medical Education (CME) programs, establishing scientific credibility through clinical research, and using digital platforms to inform prescribers and patients.
The antibacterial effectiveness of branded and branded-generic cephalosporins was also examined in the Journal of Basic and Clinical Pharmacy publication. The investigation showed that the antibacterial activity of the two groups did not differ significantly. Such findings can serve as the backbone for pharmaceutical companies to assert the quality of their branded generics. However, the perception of inferior quality persists among healthcare providers, due to inconsistent regulatory standards and the lack of robust bioequivalence data. This perception must be addressed through transparent communication, consistent product quality, and strategic endorsements by key opinion leaders in the medical field.
The Indian market is highly price-sensitive, yet price alone is not sufficient to sustain brand growth. Patients often equate higher price with better quality, and doctors are more likely to prescribe brands they perceive as reliable. Therefore, while affordability is crucial, so is the perceived value of the product. Power brands manage to strike this balance effectively by being accessible yet differentiated. Case studies such as Dolo 650 exemplify this transformation. Despite being a generic paracetamol, Dolo 650 became a household name during the COVID-19 pandemic through aggressive branding, availability, and trust built with physicians. This transition demonstrates that even common molecules can become trusted power brands with the right branding and marketing approach.
Distribution is another crucial component in creating premium positioning. In both rural and semi-urban settings, pharmacists have a big say in what people buy. At the pharmacy level, ensuring brand loyalty

requires strong after-sales assistance, ethical incentive schemes, and retailer training. Additionally, businesses need to make investments in backend operations like inventory control and prompt product restocking, which subtly strengthen the dependability of the brand.

Several structural issues still exist despite these tactics. Market saturation with several brands of the same chemical, each with little distinctiveness, is frequently the outcome of regulatory ambiguity in the approval and monitoring of branded generics. Stakeholder mistrust has been exacerbated by the absence of uniformity in bioequivalence testing and manufacturing procedures. To expedite approvals, guarantee compliance, and enable equitable pricing structures that benefit patients and manufacturers alike, policymakers must intervene.

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It is impossible to overestimate the importance of the doctor in prescribing decisions. In many cases, doctors continue to prescribe by brand name rather than the generic name, influenced by long-standing relationships with pharmaceutical representatives. Therefore, any branding strategy must include robust physician engagement through scientific liaisons and academic initiatives. Similarly, hospital tie-ups and formulary inclusions can cement a brand's reputation within institutional frameworks.

Ultimately, the transformation from a branded generic to a power brand in India's pharmaceutical sector requires a multi-pronged strategy that includes value-based pricing, scientific advocacy, physician education, and patient-centric marketing. Businesses need to make the investment to give their products a distinctive personality that transcends the chemical. Only then can they build enduring brands that not only survive in India's competitive market but also command loyalty and premium value.

In India's pharmaceutical industry, going from a branded generic to a power brand necessitates a multifaceted approach that incorporates value-based pricing, physician education, scientific advocacy, and patient-centric marketing. Businesses need to make the investment to give their products a distinctive personality that transcends the chemical. Only then can companies create long-lasting brands that demand loyalty and high value in addition to surviving in India's cutthroat market.

In conclusion, there are many obstacles in the path from generic to power brand, but there are also a ton of chances for impact, innovation, and differentiation. The issue of branded generics in India serves as a stark reminder of how urgently marketing, production, and regulatory procedures must change. By implementing a thorough structure that places an emphasis on ethical marketing, trust, and quality, pharmaceutical companies.

CHAPTER - 5
RECOMMENDATION

Given the insights from this research, it is clear that turning branded generics into leading brands in India's competitive pharmaceutical landscape requires a comprehensive and strategic approach. Pharmaceutical firms need to transcend simple cost benefits and establish a unique brand identity that communicates reliability, clinical effectiveness, and emotional significance to both healthcare professionals and consumers. This necessitates the creation of a strong narrative focused on quality and trust, backed by consistent brand messaging and active consumer engagement. A vital element of this process is tackling the deep-seated skepticism regarding the quality of branded generics. To address this concern, companies should prioritize scientific validation and transparency by sharing clinical data that demonstrates the therapeutic equivalence of their products to original branded medications. Moreover, healthcare professionals, particularly those who prescribe medications, need to be actively involved through ongoing professional development and collaborations with academic institutions. Medical representatives and scientific liaisons should receive training to convey evidence-based information that supports the clinical dependability of branded generics. Consistent engagement in Continuing Medical Education (CME) programs, combined with joint clinical trials and research publications, can foster long-lasting loyalty among prescribers. Simultaneously, companies should acknowledge the expanding significance of digital health platforms as a tool for educating patients and communicating their brand. By utilizing online avenues such as mobile apps, social media, and specialized health websites, pharmaceutical brands can effectively share information with consumers regarding the effectiveness, affordability, and adherence benefits of their medications. This digital outreach should aim to address typical patient concerns.

It is equally crucial to improve distribution channels and engage pharmacists effectively. Retail pharmacists, especially in rural and semi-urban areas, often play a pivotal role in influencing medication choices. Therefore, companies should forge strong connections with these key stakeholders through tailored training initiatives, ethical incentive programs, and reliable after-sales support. Providing timely replenishment of products and solid inventory assistance will boost pharmacists' trust in recommending a specific brand, thereby enhancing its visibility and credibility in the market. Beyond backend logistics, the outward aspects of branding, like packaging and product design, should convey professionalism and quality. A product that is well-packaged with clear labels and contemporary design not only enhances visual appeal but also conveys trustworthiness and care.

Additionally, pharmaceutical companies should implement systems to track the ongoing performance of their brands regarding market share, feedback from physicians, and consumer perceptions. Continuous evaluations and feedback mechanisms are vital for enhancing branding strategies and staying relevant in an ever-changing market. These assessments should inform ongoing improvements in product presentation, outreach to consumers, and engagement with healthcare professionals. Ultimately, the transition from a simple branded generic to a powerful brand is not a singular event but a continuous journey that demands flexibility, ongoing investment, and strategic insight. By committing to ethical branding practices, scientific integrity, and clear communication, pharmaceutical firms can rebrand their generics as reliable, high-quality products that appeal to a wide range of stakeholders.

CHAPTER – 6
RESULT

The transformation of branded generics into power brands within India's pharmaceutical sector extends beyond mere marketing—it is a complex interplay of consumer trust, competitive strategy, regulatory frameworks, and educational outreach. Our research highlights the unique challenges and opportunities in repositioning branded generics amidst India's rapidly evolving healthcare landscape.

Despite strong evidence confirming the bioequivalence of branded generics to original brand-name drugs, a significant perception gap remains. Many healthcare providers and patients continue to question their reliability and quality. This distrust directly influences prescribing behavior and patient choices, making it a critical barrier to overcome.

Educational initiatives targeting healthcare professionals are essential to bridging this perception gap. By investing in robust Continuing Medical Education (CME) programs and encouraging clinical research involvement, pharmaceutical companies can foster greater confidence among physicians. Physicians equipped with accurate knowledge and firsthand experience become advocates more willing to prescribe branded generics.

Price sensitivity continues to dominate the Indian market, yet affordability alone does not guarantee market success. Our findings underscore the importance of creating a comprehensive value proposition that combines competitive pricing with clear communication of quality, efficacy, and therapeutic benefits. Strategic marketing efforts should position branded generics as trustworthy, cost-effective alternatives, thereby shifting consumer attitudes.

Successful case studies such as Dolo 650 illustrate how branding and strategic positioning can elevate a generic product to household-name status. A combination of appealing packaging, targeted marketing campaigns, and effective use of digital platforms can significantly enhance consumer engagement and brand loyalty.

Distribution channels, particularly pharmacists in rural and semi-urban areas, play a vital role in influencing consumer choices. Pharmaceutical companies should strengthen relationships with pharmacists through training, ethical incentives, and dependable support systems. Reliable product availability and efficient inventory management at the retail level further build brand credibility and encourage pharmacists to recommend branded generics confidently.

Regulatory challenges must also be addressed to support this transformation. Market saturation and inconsistent regulatory standards highlight the need for a cohesive regulatory framework. Clear guidelines on bioequivalence testing and product approvals will help ensure that only high-quality branded generics reach the market, increasing consumer trust and enabling fair competition.

Engaging consumers directly is increasingly important as patients turn to digital health platforms for

information. A patient-centric approach that communicates product benefits transparently can empower consumers to make informed healthcare decisions. Building trust through education and openness helps bridge the gap between generics and brand-name preferences.

In conclusion, evolving branded generics into power brands requires coordinated efforts across multiple fronts. Pharmaceutical companies must adopt innovative marketing strategies that emphasize quality, deepen healthcare provider engagement through education, and cultivate direct relationships with consumers. Simultaneously, addressing regulatory uncertainties and enhancing distribution networks will create a supportive environment for branded generics to thrive.

This transformation ultimately aims to improve patient care by expanding access to affordable, high-quality medications within a transparent and collaborative healthcare ecosystem. The path forward presents significant opportunities—by redefining the relationship between branded generics and consumer trust, pharmaceutical companies can build enduring power brands that resonate in India's competitive market. Achieving this vision demands ethical marketing, stringent quality control, and continuous engagement with healthcare professionals and patients alike. Such a holistic approach will benefit individual brands and contribute meaningfully to elevating healthcare delivery and patient outcomes across India.

CHAPTER – 7
CONCLUSION

The journey to transform branded generics into power brands in India's pharmaceutical market is multifaceted, requiring a strategic blend of trust-building, education, effective marketing, and regulatory support. Despite proven bioequivalence, a persistent perception gap challenges the acceptance of branded generics among healthcare providers and patients. Addressing this through targeted educational programs and clinical engagement is critical for changing prescribing behaviors.

While price sensitivity remains a defining characteristic of the Indian market, success depends on delivering a compelling value proposition that balances affordability with clear communication of quality and efficacy. Strategic branding, as demonstrated by successful case studies, can elevate generics into trusted household names. Strengthening distribution networks, especially by engaging pharmacists in rural and semi-urban areas, further enhances brand visibility and consumer confidence.

Regulatory reforms that standardize approval processes and bioequivalence criteria are necessary to ensure market quality and fair competition. Moreover, embracing a patient-centric approach that leverages digital platforms for education and transparency will empower consumers and foster brand loyalty.

Ultimately, repositioning branded generics as power brands offers an opportunity to improve healthcare access and outcomes in India. By combining ethical marketing, robust quality assurance, and continuous stakeholder engagement, pharmaceutical companies can build enduring brands that benefit both the market and the millions of patients relying on affordable, effective medication.

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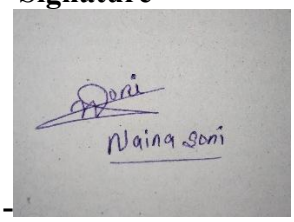

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