

SUMMER INTERNSHIP PROGRAM

at

Mankind Pharma Ltd.

From 12th may 2025 to 21st July 2025

A REPORT BY

Akshita Jaiswal

Master of Business Administration

Pharmaceutical Management

Roll no: 0602

2024-26

under the Mentorship of

Dr. Sudhinder Singh Chowhan



31-July -2025

To Whomsoever It May Concern

This is to certify that **Ms. Akshita Jaiswal** student of MBA Pharmaceutical Management from **IIHMR University Jaipur** has successfully completed her training program with **Mankind Pharma Ltd.** in PMT Department from **13th May 2025 to 25th July 2025**.

She was found to be diligent, sincere & dedicated during her training period.

We wish her all the best for future endeavors.

For Mankind Pharma Ltd.



Abhishek Khare
DGM - Human Resources

IIHMR University Faculty Mentor Approval

This is to certify that **Ms. Akshita Jaiswal** of academic year 2024-26 of **School of Pharmaceutical Management** has prepared a poster with respect to her summer internship held during May-July 2025.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date _____

A blue ink signature of Dr. Sudhinder S Chowhan.

Dr. Sudhinder S Chowhan

Associate Professor

IIHMR University Jaipur

About Company

Mankind Pharma Ltd. is an Indian company founded in 1995 by Mr. R.C. Juneja and Mr. Rajeev Juneja, is one of India's leading pharmaceutical companies, headquartered in New Delhi. Starting with a small team and a vision to provide affordable and quality medicines, Mankind quickly expanded its reach across India, especially in rural and semi-urban areas. Over the years, it has diversified into various therapeutic segments like antibiotics, gastroenterology, cardiology, diabetology, and more. It also launched popular OTC products such as Prega News, Unwanted-72, and Manforce. Today, the company operates in over 35 countries with WHO-GMP certified manufacturing units and a strong R&D base. Mankind Pharma continues to grow with a mission to improve the quality of life and a vision to become a globally admired healthcare provider.

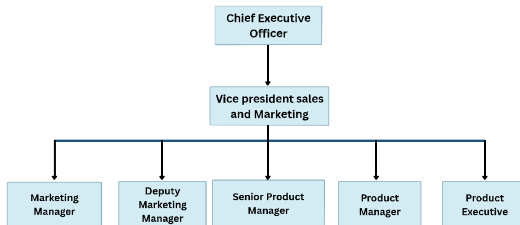
Vision

To be an innovative and research focused healthcare company, most admired for its Quality, Affordability and Accessibility.

Mission

To be able to provide cost-effective, innovative based superior quality pharmaceutical products that improve the lives of the patients.

Organisation Structure



SWOT analysis

Strengths

- Exposure to real-world pharma practices.
- Hands-on experience in medical affairs and clinician engagement.
- Strong guidance from Mankind Pharma's medical affairs team.
- Direct field exposure to medical professionals.

Weaknesses

- Limited sample size due to time constraints.
- Reliance on clinician self-reporting may involve bias.
- Limited time with doctor.
- Manual effort in recording responses.
- Inconsistent knowledge levels among doctors.

Opportunities

- Growing importance of diet in disease management.
- NAFLD/MAFLD is an emerging public health concern—scope for further research.
- Digital platforms can expand survey outreach.
- Huge scope to improve disease awareness among HCPs.
- Educational content creation (leaflets, CMEs) can build brand and doctor engagement.

Threats

- Changing dietary trends may alter relevance of current findings.
- Competition from other pharma companies in hepatology space.
- Growing competition in pharmaceutical market research.
- Resistance from busy doctors in participating in surveys.

SWOT ANALYSIS

Practical VS Theoretical approach

Practical Exposure	Theoretical Learnings
- Used Questionnaire Design to ask questions from the doctors as part of the survey. - Conducted real time clinical surveys from targeted doctors by using market researched techniques. - Interpreted doctors responses on NAFLD/MAFLD using excel. - Direct interaction and discussion with HCPs regarding the prevalence of NAFLD/MAFLD.	- Understanding of various research methods such as descriptive and observational studies design in Research methods module. - Understanding of disease prevalence and incidence in Epidemiology module. - Knowledge gained in data analysis using Excel in Statistics module. - Gained Pharma product knowledge of various diseases in pharmacology module.

Challenges faced during internship

- Time Constraints:** Limited consultation time with doctors made in-depth discussions difficult.
- Varied Awareness Levels:** Not all doctors were equally familiar with MAFLD, causing inconsistent responses.
- Focus on Technology Over Education:** Some doctors prioritized tools like FibroScan over patient education, limiting discussion on lifestyle intervention.
- Manual Data Collection:** Collecting and organizing data manually from 200 doctors was time-consuming and prone to error.

Major learnings from internship

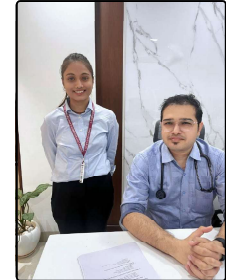
- Enhanced communication skills by interacting with over 200 doctors.
- Learned to connect marketing theories with real-world applications.
- Understood doctors' perspectives on screening, diet, and pharmacological treatment of NAFLD/MAFLD.
- Gained practical experience in field-based market research.
- Evaluation of UDCA usage by doctors and views on efficacy.

Suggestions for improvement

- Introduce digital survey platforms (e.g., tablets or mobile apps) for better efficiency and reduced errors.
- Provide visual aids or infographics to help doctors understand MAFLD screening and management.
- Organize small-scale CMEs or interactive sessions to boost engagement and knowledge sharing.
- Include open-ended questions in future surveys for qualitative insights.

About Clinical Survey

- This clinician survey aims to assess medical perspectives on the role of dietary factors - such as dietary factors such as refined flour high carbohydrates, saturated fats, salts and certain herbal supplements, in the development of NAFLD/MAFLD.
- It also explores current pharmacological strategies including the use of UDCA. The insights gathered will contribute to the better understanding of screening practices nutritional risks, and therapeutic approaches for improving liver health.



Key survey questionnaires and Findings

Screening practices	Findings
	- Most clinicians preferred routine or opportunistic screening in high risk groups - Majority prioritized screening for overweight/obese, diabetic, and metabolic syndrome patients. - Ultrasound and FibroScan were the most commonly used diagnostic tools.
Dietary Risk Factors	Findings
	- Refined flour (maida) was considered a significant contributor to NAFLD. - It was perceived to be equally or more harmful than total calorie excess. - The hazard ratio of 1.33 for high refined grain intake was viewed as clinically significant, warranting dietary counseling.
Fast Food and Ultra-Processed Foods	Findings
	- NAFLD due to fast food (>20% of daily calories) was encountered occasionally (20–50% cases). - Clinicians believed the impact of fast food is grossly or somewhat underestimated during counseling.
Clinical Dietary Counseling Behavior	Findings
	- Most clinicians frequently or always advise restricting refined flour (maida). - There was strong agreement on including refined carbohydrate reduction in NAFLD guidelines. - Majority believed reducing refined flour intake would lead to major clinical improvements.
Pharmacological Management and UDCA's Role	Findings
	- Preferred treatment approach was a combination of lifestyle modification and pharmacotherapy. - Treatment typically initiated at Fibrosis Stage 1–2 or in NASH cases without fibrosis. - Commonly preferred drugs included Saroglitazar, Pioglitazone, UDCA, Vitamin E, and combination therapies.

Reporting Format (Weekly)

Name of the Organisation: Mankind

Area/ Department/ Project of Summer Internship Program: Market Research

Name of the Student: Akshita Jaiswal

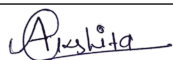
Roll no:0602

Stream: MBA-PM16

Week no:1 **From:**13-05-25 to 17-05-25

Activity Done	•Attended online Meeting session and received Project briefing from Mankind. •Understood the company's operations and The Role of Dietary and Pharmacological Interventions in NAFLD/MAFLD. •Received FILI Survey Questionnaires related to research. •Conducted surveys of physicians and Gastroenterologist to gather information regarding NAFLD/MAFLD and opinion about FILI (Food induce liver injury). •completed a research on doctors and compiled a refined list of qualified doctors according to Mankind criteria. •Visited doctor's clinic in Indore
Linking theory (Classroom learning) with practice at your organisation	•The internship at Mankind allowed the practical application of concept of research •The research and outreach activities helped apply theoretical knowledge of public health systems, data management, and healthcare marketing. •Applied research methodology, especially survey design and data collection techniques learned during Research Methods classes. Understood practical challenges in primary data collection and communication with medical professionals.
Gaps identified on the working area.	•Some doctors were hesitant to respond due to time constraints or concerns about confidentiality. Also noticed delays due to appointment scheduling. Digital tools for survey collection could be improved.

Suggestions for improvement	•Introduce a digital survey format (e.g., Google Forms or mobile app) to reduce paperwork and data entry time. Offer brief brochures explaining the purpose of the survey to doctors to build trust.
Plan for the next week	Target to cover more doctors in a new geographical area. Start preliminary analysis of collected data. Present key emerging trends in a short briefing to internal mentor at Mankind. Explore adding a Likert scale in the survey for more detailed analysis.



Signature of the Student; Akshita Jaiswal

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Mankind

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Name of the Student: Akshita Jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:2 **From:**19-05-25 **to** 24-05-25

Activity Done	• This week, I applied theoretical knowledge from the classroom to practical fieldwork. I planned the survey schedule and mapped different areas of Indore city to ensure efficient coverage. And I covered the New Palasia area in Indore. • I then conducted surveys with 10 doctors. Through these interactions. • I gathered insights on food-induced liver injury, expanding my understanding of this health concern and its practical implications in clinical settings.
Linking theory (Classroom learning) with practice at your organisation	• I Created a excel sheet which is very easy to Collect the information of Doctors like(Name, Contact, year of experience Registration Number)
Gaps identified on the working area.	• Initially, there was a lack of a structured area-wise approach, which could have led to missed coverage or inefficiencies. • There were also some delays in coordinating with the doctors' schedules.
Suggestions for improvement	• Creating a fixed appointment schedule in advance and using mapping tools or spreadsheets for better area division could improve time efficiency. Also, preparing a concise and clear questionnaire might help in smoother interactions.
Plan for the next week	• Continue the survey process with more doctors across new areas of Indore. Aim to complete at least 30 surveys. Deepen research into liver injuries. Focus on improving communication and documentation.



Signature of the Student; Akshita jaiswal

Approved by the IIHMR University's Mentor

On the last day of every week Saturday -) report in the above format should be submitted to the faculty mentor. Submission of total 10 reports in 10 weeks is compulsory. Each report should not be more than 2 pages.

Reporting Format (Weekly)

Name of the Organisation: Mankind Pharma

Area/ Department/ Project of Summer Internship Program: Market Research

Name of the Student: Akshita jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:3 **From:**26-05-25 **to** 31-05-25

Activity Done	• This week, I Gain Knowledge about liver disease specifically fibrosis and Cirrhosis. • And Doctors ask Question related to survey and Fibrosis and cirrhosis. • I visited 30 doctors and discussed their opinion on liver disease across different clinics and hospitals in Indore (Kalani Nagar). • The Subjects like Pharmacology and disease management helped me to understand the medical terminology and communicate effectively with healthcare professionals.
Linking theory (Classroom learning) with practice at your organisation	• The field exposure helped me connect classroom concepts of disease epidemiology, patient communication, and pharmaceutical Management strategies with real-world practices.
Gaps identified on the working area.	• Some doctors expressed that they were not well informed about the latest Mankind products related to liver health. • There was also a lack of structured feedback collection mechanisms on how doctors perceive and use Mankind's liver-care offerings.
Suggestions for improvement	• There should be regular initiatives like this survey to maintain strong doctor engagement. • A structured channel for ongoing feedback and knowledge sharing (e.g., through WhatsApp groups, newsletters, or webinars) can help build stronger relationships with HCPs.
Plan for the next week	• Expand the reach by visiting 35-40 doctors in a new zone. Start compiling key insights from the surveys to identify patterns. I also plan to shadow a medical

	representative to understand how they communicate liver product benefits to doctors.
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Name of the Organisation: Mankind Pharma

Area/ Department/ Project of Summer Internship Program: Market Research

Name of the Student: Akshita Jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:4 **From:**02-06-25 **to** 07-06-25

Activity Done	• Conducted Surveys with Doctors • Approached doctors across clinics and hospitals. • Asked structured questions related to liver diseases, especially NAFLD and MAFLD. • Explained the objective of the survey and collected their insights.
Linking theory (Classroom learning) with practice at your organisation	• During this week, I continued interacting with doctors across various clinics and hospitals. I applied my theoretical knowledge of liver physiology and public health survey techniques in real-life settings. • The concepts of non-alcoholic fatty liver disease (NAFLD) and metabolic dysfunction-associated fatty liver disease (MAFLD), which I studied in the classroom, helped me frame relevant questions and understand responses better. • I also practiced soft skills like communication and professionalism during doctor interactions.
Gaps identified on the working area.	• Some doctors were too busy to respond to surveys in detail. A few lacked awareness about the newer terminology of MAFLD. • Time constraints and hesitancy in sharing data were common challenges. Additionally, lack of structured response collection tools made documentation slower.
Suggestions for improvement	• Creating a short, structured digital survey form (Google Form or app-based) would save time and improve participation. • Providing prior appointment or intimation to doctors can enhance engagement. Awareness materials on MAFLD could be shared to facilitate more informed conversations

Plan for the next week	• Next week, I plan to cover more doctors in other localities and re-approach those who were unavailable. I also aim to categorize collected data for early-stage analysis and identify common trends among responses related to NAFLD/MAFLD.
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Name of the Student: Akshita Jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:5 **From:** 09-06-25 to 14-06-25

Activity Done	• Followed up with doctors previously contacted to complete pending surveys. • Approached new doctors in additional clinics/hospitals to broaden data collection. • Focused questions on MAFLD awareness, diagnosis, and differences from NAFLD. • Applied classroom concepts of liver health and metabolic dysfunction during survey conversations. • Identified trends and patterns in doctor responses for future analysis. • Improved professional communication, data handling, and time management skills.
Linking theory (Classroom learning) with practice at your organisation	• Applied theoretical understanding of NAFLD/MAFLD, liver metabolism, and diagnostic approaches in real-world interactions. • Used public health and pharma survey knowledge to frame questions and interpret responses effectively. • Experienced how pharmaceutical companies use field data to support awareness and strategy.
Gaps identified on the working area.	• Some doctors still unfamiliar with MAFLD terminology and its revised criteria. • Time constraints limit depth of responses in many cases. • Variation in awareness levels and patient education strategies observed among doctors.
Suggestions for improvement	• Providing a simple brochure or awareness leaflet about MAFLD could encourage doctors to engage better. • Introducing digital survey tools may streamline response collection and reduce time.

	• Creating zone-wise doctor lists may help in scheduling and coverage planning.
Plan for the next week	• Begin categorizing and analyzing survey responses for key findings. • Continue survey collection with remaining doctors in nearby localities. • Prepare a preliminary summary of patterns observed across different specialties.



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Name of the Student: Akshita Jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:6 **From:** 16-06-25 to **21-06-25**

Activity Done	• Successfully covered and collected feedback from 120 doctors in various hospitals and clinics. • Focused on gathering detailed insights about MAFLD awareness, diagnosis, and differences from NAFLD. • Began organizing the collected data into initial categories for better analysis. • -Resolved minor scheduling challenges by planning visits more efficiently.
Linking theory (Classroom learning) with practice at your organisation	• Applied theoretical knowledge of liver diseases, metabolic dysfunction, and public health concepts while interacting with doctors. • Used classroom learning to design practical survey questions and understand field responses. • Observed how pharma companies rely on real field data to develop awareness and marketing strategies.
Gaps identified on the working area.	• Limited time during consultations affects how detailed the responses can be. • Differences in awareness and patient counselling approaches among doctors were noticed.
Suggestions for improvement	• Providing a simple MAFLD information leaflet may help doctors understand and respond better. • Using digital tools for surveys can make data collection faster and more accurate.

Plan for the next week	• Continue collecting feedback from remaining doctors in nearby areas. • Start preparing a detailed summary of the findings so far.
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Reporting Format (Weekly)

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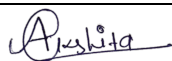
Name of the Student : Akshita Jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:7 **From:** 23-06-25 to 28-06-25

Activity Done	• Successfully covered and collected feedback from 150 doctors across various hospitals and clinics. • Engaged in in-depth discussions with doctors on MAFLD awareness, screening practices, and differentiation from NAFLD and liver cirrhosis. • Noted common queries from doctors, especially about the difference between liver fibrosis and cirrhosis, and frequently seen liver-related issues. • Organized data into updated categories to highlight key trends in doctor responses.
Linking theory (Classroom learning) with practice at your organisation	• Used classroom knowledge to ask relevant questions. • Applied public health concepts in real field situations. • Understood how pharma companies use field data for awareness.
Gaps identified on the working area.	• Doctors had limited time for detailed answers. • Awareness levels varied among doctors. • Some doctors focused more on screening than awareness.
Suggestions for improvement	• Share a simple info leaflet about MAFLD. • Use digital surveys for quicker data collection.
Plan for the next week	• Continue collecting feedback from remaining doctors in nearby areas. • Start preparing a detailed summary of the findings so far.



Signature of the Student; Akshita Jaiswal

Reporting Format (Weekly)

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Name of the Student: Akshita Jaiswal

Roll no:0602

Stream: MBA-PM16

Week no:8 **From:** 30-06-25 **to** 05-06-25

Activity Done	• Completed 150 doctors surveys with a few pending doctors. • I also covered near by area of Indore to complete the task like Ujjain. • Some Data is pending and that will be upload in this week.
Linking theory (Classroom learning) with practice at your organisation	• Used research report writing concepts learned in class while preparing the final report. • Applied data interpretation techniques such as pattern analysis and segmentation. • Understood how pharma companies use such research to shape campaigns, product positioning, and doctor education.
Gaps identified on the working area.	• Lack of a centralized digital platform made it difficult to manage and analyze real-time data. • Some survey responses were too generic to derive actionable insights. • Time constraints limited deeper exploration of related liver conditions.
Suggestions for improvement	• Introducing digital data collection and instant reporting tools could make the process more efficient. • Training field interns on basic data analysis would improve output quality. • Conducting a short orientation on doctor engagement strategies before fieldwork can be helpful.
Plan for the next week	• Going to upload more data in this week.



Signature of the Student; Akshita Jaiswal

Reporting Format (Weekly)

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Roll no:0602

Stream: MBA-PM16

Week no:09 **From:** 7-06-25 to 12-07-25

Activity Done	• This week, I successfully interacted with 250 doctors across various hospitals and clinics out of the total target of 300. • Engaged in meaningful discussions focusing on MAFLD (Metabolic Associated Fatty Liver Disease) – its awareness level, current screening practices, and how it is clinically distinct from NAFLD and liver cirrhosis. • Doctors frequently inquired about the difference between liver fibrosis and cirrhosis, and shared insights on the most common liver-related conditions they encounter. • The overall response from doctors has been very encouraging, with many showing willingness to collaborate in future awareness initiatives.
Linking theory (Classroom learning) with practice at your organisation	• Applied pharmaceutical marketing knowledge from the classroom to draft effective and targeted questionnaires. • Used analytical skills to interpret field-level data and feedback. • Understood how field research directly contributes to the development of evidence-based strategies in pharmaceutical marketing.
Gaps identified on the working area.	• Due to limited time, some consultations were brief, affecting the depth of responses. • Varying levels of knowledge about MAFLD among doctors impacted consistency in feedback. • Some doctors emphasized screening tools more than general disease education

Suggestions for improvement	• Distribution of short, crisp MAFLD information leaflets for doctors would aid in awareness. • Adoption of digital data collection tools could increase speed, accuracy, and convenience in gathering feedback. • Organize small group sessions with doctors for better engagement and richer discussions.
Plan for the next week	• Aim to complete feedback collection from the remaining 50 doctors to reach the target of 300. • Begin compiling and analysing the complete data set for a comprehensive final report. • Draft executive summaries to highlight key insights, trends, and recommendations



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Reporting Format (Weekly)

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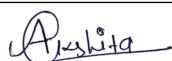
Name of the Student: Akshita Jaiswal

Roll no: 0602

Stream: MBA-PM16

Week no:9 **From:** 14-07-25 **to** 18-07-25

Activity Done	• Completed 200 doctors survey. • Completed all final formalities related to the internship conclusion. • Submitted updated report and presentation after incorporating final feedback. • Prepared for internship viva or evaluation at the institute.
Linking theory (Classroom learning) with practice at your organisation	• Understood the importance of presentation and reporting in pharma-based field research. • Applied learning from health communication, reporting formats, and strategic insights. • Experienced how pharma companies use structured field inputs for decision-making.
Gaps identified on the working area.	• Limited exposure to backend data analytics during the internship. • Infrequent structured review meetings made it harder to assess ongoing progress. • Final presentation timing and feedback were rushed due to multiple submissions.
Suggestions for improvement	• Final report submission is pending of work which I done during my internship to Mankind Mentor.
Plan for the next week	• This was last week of internship only report submission in pending and ppt.



Signature of the Student; Akshita Jaiswal

Approved by the IIHMR University's Mentor

Compiled Report

Name of the Organisation: Mankind

Area/ Department/ Project of Summer Internship program: Market Research

Name of the Student: Akshita Jaiswal

Roll no: 0602

Stream: MBA PM 16

Activity Done	Week 1 • Attended an online meeting with Mankind Pharma to understand the project scope. • Learned about the company's focus on dietary/pharmacological interventions for NAFLD/MAFLD. • Received FILI (Food-Induced Liver Injury) survey questionnaires for research. • Compiled a refined list of qualified doctors in Indore based on Mankind's criteria. • Conducted initial surveys with physicians and gastroenterologists on NAFLD/MAFLD awareness and doctors' opinions on FILI. • Visited clinics in Indore to begin data collection. Week 2 • Conducted surveys with 10 doctors in New Palasia, Indore, focusing on food-induced liver injury. • Mapped survey areas and planned schedules for efficient coverage. • Created an Excel sheet to organize doctor details (name, contact, experience, registration number). Week 3 • Visited 30 doctors in Kalani Nagar, discussing liver diseases (fibrosis, cirrhosis). • Applied pharmacology and disease management knowledge to improve communication. Week 4 • Surveyed doctors on NAFLD/MAFLD, explaining survey objectives and collecting insights. • Practiced soft skills like professionalism during interactions. Week 5 • Followed up with doctors and expanded surveys to new clinics/hospitals. • Focused on MAFLD awareness and diagnostic
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	differences from NAFLD. Week 6 - Collected feedback from 120 doctors, organizing data for analysis. - Improved scheduling efficiency to resolve time constraints. Week 7 - Engaged 150 doctors in discussions on MAFLD screening practices. - Noted common queries about liver fibrosis vs. cirrhosis. Week 8 - Completed 150 surveys, covering nearby areas like Ujjain. - Prepared final report using research writing and data interpretation techniques. Week 9 - Interacted with 250/300 target doctors, discussing MAFLD awareness. - Drafted executive summaries for key insights. Week 10 - Finalised 200 surveys and submitted updated reports/presentations. - Prepared for internship viva.
Linking theory (Classroom learning) with practice at your organisation	✓ Applied pharmacology and disease management concepts to frame survey questions and understand doctor responses. ✓ Used public health survey techniques for data collection and analysis. ✓ Leveraged pharmaceutical marketing strategies to design targeted questionnaires. ✓ Connected liver physiology theories (NAFLD/MAFLD, fibrosis) to real-world clinical discussions. ✓ Practiced soft skills (communication, professionalism) learned in class during fieldwork. ✓ General management principles.
Gaps identified on the working area.	- Lack of centralized digital platforms for real-time data management. - No fixed appointment system, leading to scheduling delays. - Doctors limited familiarity with MAFLD terminology and Mankind's liver-care products. - Inconsistent depth of survey responses due to time constraints. - Generic survey responses hindered actionable insights. - Limited backend exposure to data analytics tools.

Suggestions for improvement	• Adopt digital tools (Google Forms, apps) for faster data collection. • Create zone-wise doctor lists and fixed appointment schedules. • Distribute MAFLD awareness leaflets to standardize knowledge. • Organize webinars/WhatsApp groups for continuous feedback. • Pre-internship orientation on doctor engagement strategies. • Training on basic data analysis for better output quality.
Key Learnings	• Gained hands-on experience in designing surveys, managing fieldwork, and analyzing trends. • Understood how pharma companies use field data for marketing strategies and doctor education. • Improved communication, time management, and adaptability in dynamic settings. • Successfully bridged classroom theories (liver diseases, public health) with practical applications. • Gained clarity on Mankind's research priorities in liver diseases. • Recognized the need for better time management and digital tools in fieldwork.



Signature of the Student

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