HEALTHCARE, REGULATORY AND REIMBURSEMENT LANDSCAPE - UNITED ARAB EMIRATES
Executive Summary

The UAE’s healthcare market has significant potential for growth, driven by an increasing burden of lifestyle-related diseases, medical tourism, straightforward regulatory guidelines and a preference for branded imported products. However, factors such as frequent price cuts by the government and usage of counterfeit drugs will restrict the growth of the pharmaceutical market.

The UAE is the second largest country in the Middle East in terms of capital invested in the pharmaceutical sector. In 2013, the UAE’s pharmaceutical market was estimated to be worth $XX billion, having increased from $XX billion in 2008 at a Compound Annual Growth Rate (CAGR) of XX%. The market is expected to reach $XX billion in 2020 at a CAGR of XX% (Kulkarni, 2010). Increased healthcare expenditure, the growing popularity of medical tourism and a growing elderly population are the main contributors to market growth.

Due to its growing healthcare infrastructure and lower treatment costs compared to competitors, the UAE is quickly gaining popularity as a medical tourism destination due to its low costs, English-speaking medical staff and virtually non-existent queues for treatment (Woodman, 2012). Dubai Health Authority is working to develop the medical tourism sector. It is formulating different healthcare packages according to patient requirements and the first package (wellness and preventive services package) is to be launched in October 2014 (UAEinteract, 2014f).

Branded imported drugs dominate the pharmaceutical market, with approximately XX% of the market share. Therapeutic segments such as cardiovascular diseases and cancer are expected to grow significantly in the coming years due to the growing incidence of certain lifestyle diseases. Multinational companies will continue to penetrate the market as they offer largely patented drugs, whereas a lack of R&D activities from domestic manufacturers has limited their ability to offer patented drugs.

The UAE government has been reducing the prices of drugs since 2011 to make them more affordable for people as the prices of pharmaceutical medicines were comparatively much higher than in other neighboring GCC countries. Since 2011, the Ministry of Health (MoH) has reduced the prices of medicines five times, by percentages ranging from XX% to XX% (Sophia, 2014; Zain, 2014).

The proliferation of counterfeit drugs in the UAE is very high. According to a 2010 European Commission report, XX% of the drugs seized in the European Union (EU) were routed through the UAE (Underwood, 2010). These factors hamper the pharmaceutical market in the UAE.
**Executive Summary**

### Pharmaceutical Market, UAE, Revenue ($bn), 2008–2020

<table>
<thead>
<tr>
<th>Year</th>
<th>Revenue ($bn)</th>
<th>CAGR (2008–2020): XX%</th>
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Source: Kulkami, 2010

In 2008, the UAE's medical device market was valued at approximately $XXm and $XXm in 2013. The medical device market is estimated to reach $XXm in 2020, at a CAGR of XX% from 2014, mainly due to positive demographics, increased healthcare awareness and a rise in healthcare spending. The significant demand for medical devices in the UAE is met through imports.

In an attempt to prevent age-related chronic diseases and lifestyle diseases, the government has implemented the national Weqaya program and set up various specialty healthcare facilities.

### Medical Device Market, UAE, Revenue ($m), 2008–2020

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Source: GlobalData, Medical eTrack [Accessed June 5, 2014]

The regulatory authority provides an efficient system for approving pharmaceutical products and medical devices, positively influencing the growth of the healthcare market.

In 2008, the MoH introduced an online registration system with the aim of increasing transparency and expediting the overall process by making the filing process easier and allowing companies to determine the status of their application at any time.

To overcome the language barrier, the government allows filing in both English and Arabic.

In 2012, according to the World Intellectual Property Organization (WIPO), the UAE registered XX patents and was second only to Saudi Arabia, which had XX registered patents (WIPO, 2014).
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Introduction

2 Introduction

2.1 GlobalData Report Guidance

- The report begins with an executive summary, which gives an overview of the UAE’s healthcare market and the key driving factors behind its growth. It also provides a snapshot of the country’s demographic, regulatory and reimbursement landscape and the healthcare infrastructure.

- Chapter three provides an overview of the UAE’s pharmaceutical and medical device markets, covering the market size, the shares of the generic, Over-The-Counter (OTC) and biologic/biosimilar sectors; and the market’s key drivers and barriers. It also includes profiles and SWOT assessments of the major players.

- Chapter four covers the reimbursement and payer landscape and includes details of the reimbursement process, insurance providers, pricing policies and drug price trends in the UAE. It also looks at the regulatory landscape and gives an overview of the regulatory agencies and approval processes for new drugs and medical devices. Also covered is the licensing process for the manufacture, export and import of pharmaceuticals; regulations for pharmaceutical advertising, labeling, packaging and clinical trials; and an overview of the country’s intellectual property rights.

- Chapter five provides detailed analysis of the political and economic environment in the UAE and analyzes the country’s economic indicators, demographics and healthcare infrastructure and expenditure.

- Chapter six gives an overview of the opportunities for and challenges to growth in the country’s healthcare market.
Overview of Pharmaceutical and Medical Device Markets

3.1.2 Pharmaceutical Imports and Exports

In 2008, the value of pharmaceutical imports was approximately $XX million, which increased to an estimated $XX million in 2013, at a CAGR of XX%. Pharmaceutical exports were valued at approximately $XX million in 2008, which increased to an estimated $XX million in 2013 at a CAGR of XX%.

Figure 3: Pharmaceutical Market, UAE, Imports and Exports ($m), 2008–2013

<table>
<thead>
<tr>
<th>Year</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imports</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exports</td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

Source: ITC, 2014
*Estimated figure
3.2.2.1 Cardiovascular Devices

The UAE cardiovascular device market was valued at approximately $XXm in 2013, having grown at a CAGR of XX% from 2008, driven by the increasing incidence of CVDs as a result of sedentary lifestyles and obesity. The cardiovascular devices market in the UAE is dominated by interventional cardiology, followed by cardiac rhythm management.

The interventional cardiology category was valued at approximately $XXm in 2013, having grown at a CAGR of XX% from 2008. It is expected to grow at a CAGR of XX% from 2014 to reach approximately $XXm in 2020, driven by the elderly population and a high incidence of arrhythmia.

The cardiac rhythm management category was valued at approximately $XXm in 2013 and is forecast to reach approximately $XXm by 2020, at a CAGR of XX% from 2014, driven by the increasing acceptance and ease of use of newly available interventional procedures.

![Figure 7: Medical Device Market, UAE, Cardiovascular Devices Market, Revenue ($m), 2008–2013](image)

Source: GlobalData, Medical eTrack [Accessed June 5, 2014]

<table>
<thead>
<tr>
<th>Year</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Source: GlobalData, Medical eTrack [Accessed June 5, 2014]
5.6.2 Major Components of Healthcare Expenditure

In the UAE, the MoH's expenditure accounted for XX% of total healthcare expenditure in 2012, followed by out-of-pocket expenditure (XX%), private insurance (XX%) and non-profit institutions (XX%) (WHO, 2014a).

**Figure 82: Healthcare Expenditure, UAE, Major Components (%), 2012**

![Pie chart showing healthcare expenditure components in 2012](image)

**Source:** WHO, 2014a

**Table 87: Healthcare Expenditure, UAE, Major Components (%), 2012**

<table>
<thead>
<tr>
<th>Department</th>
<th>Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of health</td>
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<tr>
<td>Private insurance</td>
<td></td>
</tr>
<tr>
<td>Non-profit institutions</td>
<td></td>
</tr>
<tr>
<td>Out of pocket expenditure</td>
<td></td>
</tr>
<tr>
<td>Others</td>
<td></td>
</tr>
</tbody>
</table>

**Source:** WHO, 2014a
7 Appendix

7.1 Abbreviations

µg/m³: micrograms per cubic meter
µm: micrometers
ADHD: Attention-Deficit Hyperactivity Disorder
AHA: American Heart Association
ALK: Anaplastic Lymphoma Kinase
BSE: Bovine Spongiform Encephalopathy
CAGR: Compound Annual Growth Rate
CIF: Cost, Insurance and Freight
CIS: Commonwealth of Independent States
CNS: Central Nervous System
COPD: Chronic Obstructive Pulmonary Disease
CPI: Consumer Price Index
CPP: Certificate of Pharmaceutical Product
CPS: Counts Per Second
CRDM: Cardiac Rhythm Disease Management
CRL: Complete Response Letter
CT: Computed Tomography
CT/NG: Chlamydia trachomatis/Neisseria gonorrhoeae
CTU: Clinical Trials Unit
CVD: Cardiovascular Disease
DALY: Disability-Adjusted Life Year
DBS: Deep Brain Stimulation
Appendix

DCCE: Dubai Carbon Center of Excellence
DEPA: Department of the Environment and Protected Areas
DEWA: Dubai Electricity and Water Authority
DHA: Dubai Health Authority
DHCC: Dubai Health Care City
DOHMS: Department of Health and Medical Services
DPT: Diphtheria, Pertussis and Tetanus
DRG: Diagnosis-Related Group
DuBiotech: Dubai Biotechnology and Research Park
EAD: Environmental Agency Abu Dhabi
EHA: Emirates Health Authority
EMAP: Emerging Markets Asia-Pacific
EMEA: Europe, the Middle East and Africa
ENT: Ear, Nose and Throat
ERWDA: Environmental Research and Wildlife Development Agency
EU: European Union
EU-GMP: European Union Good Manufacturing Practice
FDA: Food and Drug Administration
FDI: Foreign Direct Investment
FEA: Federal Environment Agency
FNC: Federal National Council
GCC: Gulf Cooperation Council
GDP: Gross Domestic Product
GLP: Good Laboratory Practice
Appendix

GMP: Good Manufacturing Practice
GNI: Gross National Income
gRED: Genentech's Research and Early Development
GSK: GlaxoSmithKline
HIPAA: Health Insurance Portability & Accountability Act
HTA: Health Technology Assessment
ISAHD: Insurance System for Advancing Healthcare in Dubai
MDD: Medical Device Directives
MENA: The Middle East and North Africa
MHLW: Ministry of Health, Labor and Welfare
NSCLC: Non-Small-Cell Lung Carcinoma
PCT: Patent Cooperation Treaty
PM10: Particulate Matter of ≤10µm diameter
pRED: Pharma Research and Early Development
QC: Quality Control
QCL: Quality Control Laboratory
R&D: Research and Development
TRIPS: Trade-related aspects of Intellectual Property Rights
TSE: Transmissible Spongiform Encephalopathy
UNDP: United Nations Development Programme
UNFCCC: United Nations Framework Convention on Climate Change
WGES: World Green Economy Summit
WTO: World Trade Organization
Y-O-Y: Year-On-Year
7.2 Bibliography


- Abasaeed et al. (2009). Self-medication with antibiotics by the community of Abu Dhabi Emirate, United Arab Emirates. Journal of Infection in Developing Countries; 3 (7): 491–497


Appendix

7.3 Research Methodology

GlobalData’s dedicated research and analysis teams consist of experienced professionals with advanced statistical expertise and marketing, market research and consulting backgrounds in the pharmaceutical industry.

GlobalData adheres to the codes of practice of the Market Research Society (www.mrs.org.uk) and Strategic and Competitive Intelligence Professionals (www.scip.org).

All GlobalData databases are continuously updated and revised. The following research methodology is followed for all databases and reports.

7.3.1 Coverage

The objective of updating GlobalData’s coverage is to ensure that it represents the most up-to-date vision of the industry possible.

Changes to the industry taxonomy are built on the basis of extensive research of company, association and competitor sources.

Company coverage is based on three key factors: revenue; products; and media attention, innovation and market potential.

- The estimated revenue of all major companies, including private and governmental, are gathered and used to prioritize coverage.
- Companies that are making the news or are of particular interest due to their innovative approach are prioritized.

GlobalData aims to cover all major news events and deals in the pharmaceutical industry, updated on a daily basis.

The coverage is further streamlined and strengthened with additional input from GlobalData’s expert panel (see below).

7.3.2 Secondary Research

The research process begins with extensive secondary research using internal and external sources to gather qualitative and quantitative information relating to each market.
The secondary research sources that are typically referred to include, but are not limited to:

- Company websites, annual reports, financial reports, broker reports, investor presentations and US Securities and Exchanges Commission (SEC) filings
- Industry trade journals, scientific journals and other technical literature
- Internal proprietary databases
- Relevant patent and regulatory databases
- National government documents, statistical databases and market reports
- Procedure registries
- News articles, press releases and web-casts specific to the companies operating in the market

The CountryFocus reports are largely based on secondary research and use reliable and authoritative sources such as the IMF, the World Bank, OECD, WHO, UNICEF, UNStats, BEA, MHLW and NHS, among others.

### 7.3.3 Forecasts

The CountryFocus reports use the data available from the secondary sources to forecast and validate the future trends for a country's healthcare market, as well as parameters related to the economy and healthcare infrastructure and expenditure.

### 7.3.4 Expert Panel

GlobalData uses a panel of experts to cross-verify its databases and forecasts.

GlobalData’s expert panel comprises marketing managers, product specialists, international sales managers from pharmaceutical companies, academics from research universities, consultants from venture capital funds, and distributors/suppliers of pharmaceuticals and supplies.

Historic data and forecasts are relayed to GlobalData’s expert panel and adjusted in accordance with their feedback.
7.4 Disclaimer

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