Indian ophthalmology is now firmly on the global map

New York might be the original city that never sleeps, but Bangalore, India’s wildly misnamed “Garden City”, could probably give it a good run for its money.

Arriving at Bangalore airport in the middle of the night, one is greeted by a jostling, bustling cacophony of noise and colour – and that’s just trying to find a taxi.

Western clichés about modern India abound. While the roar of the Chinese manufacturing dragon may inspire more headlines in the western media, the compelling tale of India’s economic elephant on the march is not far behind in terms of column inches.

As one economist succinctly put it: “India is shining; the elephant is rising; the 21st century will be an Indian century.”

In many ways, Bangalore defines the very essence of this modern parable of a nation transformed from poorhouse to powerhouse.

The city has become the poster child of India’s high-tech re-branding and prides itself on being dubbed the “Silicon Valley of the East”.

It is here that countless call centre workers field irate calls from computer users half a world away in Dublin, Dusseldorf or Dallas. Land prices have soared as IT companies such as IBM, Microsoft, SAP and others build shiny new office blocks and corporate campuses on the outskirts of Bangalore.

Added to the rush of foreign capital into Bangalore is the wealth generated by homegrown private enterprise. Indian companies built from scratch by local entrepreneurs have been the primary engine driving much of India’s recent economic expansion.

In Bangalore, the sense of a city and a people on the move is tangible. Despite the grinding poverty, patchwork infrastructure, endemic corruption, endless traffic jams and countless other daily frustrations, the city still manages to radiate a dynamic energy and optimism.

Perhaps this is partly due to the fact that Bangalore – a city whose name is thought to derive from Benda Kaaluru (the city of boiled beans) – has evolved into an ethnically diverse melting pot, with over 62 per cent of the city’s 6.5 million population comprising migrants from other parts of India.

Bangalore has witnessed the rise of a new affluent middle class. If current high-growth rates are sustained, economists predict that average income levels will triple in the coming two decades and India will climb from its position as the 12th largest consumer market to become the world’s fifth-largest consumer market by 2025.

The ripples from India’s free-spending middle class are being felt across all industries from aerospace to agriculture, handicrafts to healthcare.

For India’s ophthalmic industry and its estimated 15,000 ophthalmologists, the changing face of Indian society represents both a challenge and an opportunity.

Nowhere is this more evident than in the exponential growth of cataract surgery in India over the past decade.

Indian surgeons performed an estimated 0.5 million cataract surgeries in the early 1980s. This increased to 4.8 million in 2006, 90 per cent of which included intraocular lens implantation.

The large multinational ophthalmic companies are now in India in force. At the recent All India Ophthalmological Society meeting in Bangalore, the largest and glitziest stands belonged to the usual corporate titans: Alcon, AMO, Bausch & Lomb, Carl Zeiss Meditec and so forth. As well as having its own academic journal, India is now also served by at least three competing industry magazines targeted at the specific needs of the Indian ophthalmologist.

The message is clear: Indian ophthalmology is now firmly on the global map. Any meeting that can draw over 5,000 delegates – matching some of the largest European and American conferences – is one that clearly deserves the respect and attention of the international ophthalmic community.

Yet, while the multinationals smell a gilt-edged opportunity to establish a foothold in one of the world’s biggest health markets, there is also some disquiet that the changes being wrought by market-driven pressure will only serve to further widen the gap between India’s well-heeled minority and the barefooted majority.

The recent phenomenal growth of the private health sector in India has come at a time when public spending on healthcare at 0.9 per cent of gross domestic product (GDP) is among the lowest in the world and ahead of only five countries – Burundi, Myanmar, Pakistan, Sudan, and Cambodia.

Contrast that with India’s private spending of 4.2 per cent of GDP on health, which places the country among the top 20 in the world.

To recoup this investment, many of the country’s five-star hospitals offer surgery at prices that only foreigners and the richest Indians can afford. The Indian Government has also played an active part in promoting the country as a low-cost, high-quality destination for medical treatment.

Some estimates of the value of medical tourism to India go as high as $2bn a year by 2012. A cataract or refractive surgery procedure is usually around one-tenth of the price of a similar operation in Europe or the US. Throw the incentive of a ‘free’ holiday into the mix and it’s not hard to see why medical tourism in India is estimated to be growing at a rate of 30 per cent per year.

But to make this sort of medical tourism work, potential patients need to be first reassured about the quality of care available to them. The trick is to dispel the stock images of dirty, overcrowded public hospitals, garbage in the streets and poor sanitation, and replace them with a shiny package of sterile, super-modern, sophisticated establishments that cater to a patient’s every whim.

As one manager of a corporate hospital described it: “In a corporate hospital, once the door is closed you could be in a hospital in America.”

Money buys choice, but such a luxury is well beyond the means of most Indians. An estimated quarter of India’s 1.1 billion people live on less than $1 a day, while 700 million more live on less than $2 a day.

At the same time that the AIOS meeting was taking place in Bangalore, The Indian Times reported that 14 peasants had been left partially blinded after a botched mass cataract surgery in the Uttar Pradesh state.
Pradesh state in northern India. Six eye surgeons and one technician rushed through 88 operations in four hours.

The operations, according to eyewitness accounts, were held in a local school under extremely unhygienic conditions, where the doctors put chairs in a row to form a makeshift operation table. The team left without instructing patients about postoperative care and never came back for a follow-up.

Thankfully, such cases are rare and in no way detract from the excellent work of dedicated professionals whose well-run cataract camps in India's more remote regions have saved the sight of thousands of poor people.

Other initiatives also inspire hope that India can somehow find a means to reconcile the challenge of catering for the health of its poorest citizens while satisfying the demands of its more affluent classes.

The five Aravind eye hospitals located in the Indian towns of Madurai, Tirunelveli, Theni, Coimbatore and Pondy treat over 2.3 million patients each year, two-thirds of them for free. Founded by Dr Venkataswamy, the Aravind hospitals perform about five per cent of all cataract surgeries in India.

Dr Venkataswamy's vision was to provide sight to as many people as possible and to mass-market cataract surgery in much the same way as hamburgers and pizzas are marketed by McDonalds and Pizza Hut.

The underlying principle is that large-volume, high-quality services with appropriate pricing not only result in sustainability but can in fact generate enough surplus for further expansion and growth.

The success of the Aravind hospital also led to the creation of a spin-off manufacturing division, AuroLab, producing high-quality IOls for a fraction of the cost of those produced by its international competitors.

And while skeptics said it couldn't be done, Dr Venkataswamy has proved beyond doubt that compassion and profit don't need to be mutually exclusive. In Tamil Nadu state, where the Aravind main hospital is located, the incidence of blindness is 20 per cent below the rest of India.

Now that's an Indian success story well worth celebrating - an elephant on the march that leaves only admirers in its wake.