

**Best Export Markets
for
U.S. Medical Equipment & Supplies, 2007**

Best Export Markets for U.S. Medical Equipment and Supplies was compiled by Maritza Flores-Quevedo under the supervision of Maurice Kogon, Director of the El Camino College Center for International Trade Development (CITD) in Hawthorne, California. The report is based largely on 2006 and 2007 Country Commercial Guides (CCGs) prepared by United States Commercial Service (USCS) posts abroad. All CCGs include a standard chapter “Leading Sectors for U.S. Exports.” This report drew from those CCGs which specifically recommended Medical Equipment & Supplies as a best prospect for U.S. exports.

The entire report is also available as a Word document, in print or electronically, for \$25.00. To order, contact the El Camino College CITD at: 310-973-3173 or mkogon@elcamino.edu.

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| ■ Argentina | ■ Germany (2006) | ■ Netherlands | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Australia | ■ Greece (2006) | ■ New Zealand | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ■ Brazil (2006) | ■ Haiti | ■ Norway | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Bulgaria (2006) | ■ India (2006) | ■ Philippines | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Canada | ■ Ireland | ■ Portugal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Chile | ■ Israel | ■ Qatar | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ China | ■ Italy | ■ Russia (2005) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Costa Rica (2006) | ■ Japan | ■ Saudi Arabia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Czech Republic | ■ Jordan | ■ Serbia & | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Denmark | ■ Kazakhstan | ■ Montenegro | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ El Salvador (2006) | ■ Malaysia | ■ Slovakia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ Finland | ■ Morocco (2006) | ■ Slovenia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ■ France | ■ Nepal | ■ South Africa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ South Korea (2006) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Spain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Sri Lanka | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Sweden | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Switzerland | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Syria (2006) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Taiwan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Thailand | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Turkey | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ UAE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ■ Uruguay | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Appendix: Products in Medical Equipment & Supplies, by Schedule B Code | 102-105 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

I. Export Market Brief

A. HS 9018: U.S. Medical, Surgical, Dental and Veterinary Instruments and Appliances (Including Electro-Medical and Sight-Testing) & Parts

This Market Brief provides an overview of the world market for U.S. products in the HS 9018 category, based on the latest trade statistics and market research.

Export growth: U.S. exports of products in the HS 9018 category rose from \$11 billion in 2003 to \$15.9 billion in 2006, an increase of 44% over the four-year-period.

Leading Export Markets: The leading markets for U.S. exports of products in the HS 9018 category in 2006 (all above \$1 billion) were Netherlands (\$1.99 billion, 13.0% of total), Japan (12.0%), Germany (10.0%), Canada (8.0%), and Mexico (7.0%). Other significant markets (above \$258 million) were: Belgium (5.0%), U.K. (4.0%), France (4.0%), Australia (4.0%), Italy (3.0%), China (2.0%), Korea (2.0%), Brazil (2.0%), and Spain (2.0%).

Fastest Growing Markets: The leading markets with both high and sustained growth rates for products in the HS 9018 category (2003-2006 and 2005-2006) were: Belgium (+124.0%), Brazil (+93.0%), Australia (+63.0%), Spain (+58.0%), Italy (+54.0%), Netherlands (+53.0%), and China (+47.0%).

Leading Importing Countries: The top foreign importers of products in the HS 9018 category in 2005 were Germany (\$4.5 billion, or 8.7% of total), Netherlands (8.4%), Japan (7.2%), and U.K. (7.2%). Other significant importers (all above \$2.2 billion) were France (5.1%), Italy (4.6%), and Belgium (4.3%).

World Market Size & U.S. Share: Total world exports of products in the HS 9018 category by all countries reached \$56.1 billion in 2005, up from \$34.5 billion in 2002 (+62.5%). The U.S. had a 25.2% share of the total world market in 2005. Other world suppliers with significant market shares were Germany (13.5%), Netherlands (8.3%), Ireland (7.6%) and Japan (6.0%).

Best Market Prospects: The markets listed below appear to be particularly promising for U.S. exports of products in the HS 9018 category over the next two years.

- | | | | |
|------------------|--------------|------------------|----------------|
| ▪ Argentina | ▪ France | ▪ Morocco | ▪ Slovenia |
| ▪ Australia | ▪ Germany | ▪ Nepal | ▪ South Africa |
| ▪ Austria | ▪ Greece | ▪ Netherlands | ▪ South Korea |
| ▪ Brazil | ▪ Guatemala | ▪ New Zealand | ▪ Spain |
| ▪ Bulgaria | ▪ Haiti | ▪ Nigeria | ▪ Sri Lanka |
| ▪ Canada | ▪ India | ▪ Norway | ▪ Sweden |
| ▪ Chile | ▪ Ireland | ▪ Philippines | ▪ Switzerland |
| ▪ China | ▪ Israel | ▪ Portugal | ▪ Syria |
| ▪ Costa Rica | ▪ Italy | ▪ Qatar | ▪ Taiwan |
| ▪ Czech Republic | ▪ Japan | ▪ Russia | ▪ Thailand |
| ▪ Denmark | ▪ Jordan | ▪ Saudi Arabia | ▪ Turkey |
| ▪ El Salvador | ▪ Kazakhstan | ▪ Serbia & Monte | ▪ UAE |
| ▪ Finland | ▪ Malaysia | ▪ Slovakia | ▪ Uruguay |

I. Export Market Brief

B. HS 9019: Mechano-therapy, Massage, Psychological Aptitude-Testing Appliances and Apparatus; Ozone Etc. Therapy and Respiration Apparatus; Parts and Accessories

This Market Brief provides an overview of the world market for U.S. products in the HS 9019 category, based on an analysis of the latest trade statistics and market research.

Export growth: U.S. exports of products in the HS 9019 category rose from \$643.1 million in 2003 to \$951.5 million in 2006, an increase of 48.0% over the four-year period.

Leading Export Markets: The leading markets for U.S. exports of products in the HS 9019 category in 2006 (all above \$59 million) were Canada (\$214.7 million, 23.0% of total), U.K. (13.0%), Japan (8.0%), and Germany (6.0%). Other significant markets (above \$17 million) were: Belgium (4.0%), France (4.0%), Australia (4.0%), Netherlands (3.0%), Mexico (3.0%), Ireland (3.0%), and China (2.0%).

Fastest Growing Markets: The leading markets with both high and sustained growth rates for products in the HS 9019 category (2003-2006 and 2005-2006) were U.K. (+137.0%), China (+124.0%), Canada (+104.0%), and Australia (+95.0%).

Leading Importing Countries: The top foreign importers of products in the HS 9019 category in 2005 were Japan (\$416 million, or 9.1% of total), U.K. (7.3%), Germany (5.9%), France (5.3%), and Canada (5.2%). Other significant importers (all above \$133 million) were China, Hong Kong (4.2%), Belgium (3.6%), Netherlands (3.1%), and Italy (2.9%).

World Market Size & U.S. Share: Total world exports of products in the HS 9019 category by all countries reached \$4.5 billion in 2005, up from \$2.9 billion in 2002 (+56.1%). The U.S. had a 17.8% share of the total world market in 2005. Other world suppliers with significant market shares were China (14.9%), Germany (9.5%), Australia (6.7%) and China, Hong Kong SAR (6.0%).

Best Market Prospects: The markets listed below appear to be particularly promising for U.S. exports of products in the HS 9019 category over the next two years.

- Argentina
- Australia
- Austria
- Brazil
- Bulgaria
- Canada
- Chile
- China
- Costa Rica
- Czech Republic
- Denmark
- El Salvador
- Finland
- France
- Germany
- Greece
- Guatemala
- Haiti
- India
- Ireland
- Israel
- Italy
- Japan
- Jordan
- Kazakhstan
- Malaysia
- Morocco
- Nepal
- Netherlands
- New Zealand
- Nigeria
- Norway
- Philippines
- Portugal
- Qatar
- Russia
- Saudi Arabia
- Serbia & Monte
- Slovakia
- Slovenia
- South Africa
- South Korea
- Spain
- Sri Lanka
- Sweden
- Switzerland
- Syria
- Taiwan
- Thailand
- Turkey
- UAE
- Uruguay

I. Export Market Brief

C. HS 9021: Orthopedic Appliances; Splints etc.; Artificial Parts of the Body; Hearing Aids and Other Appliances to compensate for a Defect etc.; Parts etc.

This Market Brief provides an overview of the world market for U.S. products in the HS 9021 category based on an analysis of the latest trade statistics and market research.

Export growth: U.S. exports of products in the HS 9021 category rose from \$4.09 billion in 2003 to \$5.64 billion in 2006, an increase of 37.86% over the four-year period.

Leading Export Markets: The leading markets for U.S. exports of products in the HS 9021 category in 2006 (all above \$585 million) were Netherlands (\$867 million in 2006, 15.0% of total), Ireland (15.0%), and Japan (10%). Other significant markets (above \$182 million) were: Switzerland (8.0%), Canada (8.0%), Sweden (6.0%), Germany (4.0%), U.K. (4.0%), Australia (4.0%), France (4.0%), and Mexico (3.0%).

Fastest Growing Markets: The leading markets with both high and sustained growth rates for products in the HS 9021 category (2003-2006) were Netherlands (+185.32%), Mexico (+118.04%), Australia (+93.14%), Sweden (+90.13%), and Switzerland (+52.13%).

Leading Importing Countries: The top foreign importers of products in the HS 9021 category in 2005 were France (\$2.6 billion, or 11.3% of total), Netherlands (8.7%), and Germany (8.3%). Other significant importers (all above \$1.2 billion) were Japan (6.5%), Italy (5.5%), Ireland (5.4%), and U.K. (5.4%).

World Market Size & U.S. Share: Total world exports of products in the HS 9021 category by all countries reached \$23.6 billion in 2005, up from \$11.8 billion in 2002 (+100.16%). The U.S. had a 21.4% share of the total world market in 2005. Other world suppliers with significant market shares were Switzerland (15.5%), Ireland (11.5%), France (10.3%) and Netherlands (8.3%).

Best Market Prospects: The markets listed below appear to be particularly promising for U.S. exports of products in the HS 9021 category over the next two years.

- | | | | |
|------------------|--------------|------------------|----------------|
| ▪ Argentina | ▪ France | ▪ Nepal | ▪ South Africa |
| ▪ Australia | ▪ Germany | ▪ Netherlands | ▪ South Korea |
| ▪ Austria | ▪ Greece | ▪ New Zealand | ▪ Spain |
| ▪ Brazil | ▪ Guatemala | ▪ Nigeria | ▪ Sri Lanka |
| ▪ Bulgaria | ▪ Haiti | ▪ Norway | ▪ Sweden |
| ▪ Canada | ▪ India | ▪ Philippines | ▪ Switzerland |
| ▪ Chile | ▪ Ireland | ▪ Portugal | ▪ Syria |
| ▪ China | ▪ Israel | ▪ Qatar | ▪ Taiwan |
| ▪ Costa Rica | ▪ Italy | ▪ Russia | ▪ Thailand |
| ▪ Czech Republic | ▪ Japan | ▪ Saudi Arabia | ▪ Turkey |
| ▪ Denmark | ▪ Jordan | ▪ Serbia & Monte | ▪ UAE |
| ▪ El Salvador | ▪ Kazakhstan | ▪ Slovakia | ▪ Uruguay |
| ▪ Finland | ▪ Malaysia | ▪ Slovenia | |
| | ▪ Morocco | | |

I. Export Market Brief

D. HS 9022: X-ray etc. Apparatus, including Radiography or Radiotherapy Apparatus, X-ray Tubes and Generators, High Tension Generators etc.; Parts and Accessories

This Market Brief provides an overview of the world market for U.S. products in the HS 9022 category, based on an analysis of the latest trade statistics and market research.

Export growth: U.S exports of products in the HS 9022 category rose from \$2.22 billion in 2003 to \$3.15 billion in 2006, an increase of 42.0% over the four-year period.

Leading Export Markets: The leading markets for U.S. exports of products in the HS 9022 category in 2006 (all above \$133 million) were Japan (\$449 million, 14.0% of total), Germany (12.0%), France (9.0%), Canada (7.00%), China (6.0%), Mexico (5.0%), Netherlands (5.0%) and U.K. (4.0%). Other significant markets (above \$61 million) were: Israel (3.0%), Italy (3.0%), Brazil (2.0%), Korea (2.0%), Australia (2.0%), India (2.0%), and Belgium (2.0%),

Fastest Growing Markets: The leading markets with both high and sustained growth rates for products in the HS 9022 category (2003-2006) were Israel (+321.0%), Korea (+131.0%), Mexico (+105.0%), and Belgium (+95.0%).

Leading Importing Countries: The top foreign importers of HS 9022 in 2005 were China (\$ 1.08 billion, or 9.2% of total, Japan (7.3%), Netherlands (6.9%), Germany (6.8%), and France (6.5%). Other significant importers (all above \$311 million) were U.K. (4.4%), Canada (3.2%), Italy (3.1%), and Republic of Korea (2.6%).

World Market Size & U.S. Share: Total world exports of HS 9022 by all countries reached \$13.4 billion in 2005, up from \$7.9 billion in 2002 (+69.1%). The U.S. had a 21.4% share of the total world market in 2005, topped only by Germany (24.9%). Other world suppliers with significant market shares were Netherlands (10.3%), Japan (9.6%), France (8.7%) and U.K. (4.1%).

Best Market Prospects: The markets listed below appear to be particularly promising for U.S. exports of products in the HS 9022 category over the next two years.

- | | | | |
|------------------|--------------|------------------|---------------|
| ■ Argentina | ■ Germany | ■ Netherlands | ■ Spain |
| ■ Australia | ■ Greece | ■ New Zealand | ■ Sri Lanka |
| ■ Austria | ■ Guatemala | ■ Nigeria | ■ Sweden |
| ■ Brazil | ■ Haiti | ■ Norway | ■ Switzerland |
| ■ Bulgaria | ■ India | ■ Philippines | ■ Syria |
| ■ Canada | ■ Ireland | ■ Portugal | ■ Taiwan |
| ■ Chile | ■ Israel | ■ Qatar | ■ Thailand |
| ■ China | ■ Italy | ■ Russia | ■ Turkey |
| ■ Costa Rica | ■ Japan | ■ Saudi Arabia | ■ UAE |
| ■ Czech Republic | ■ Jordan | ■ Serbia & Monte | ■ Uruguay |
| ■ Denmark | ■ Kazakhstan | ■ Slovakia | |
| ■ El Salvador | ■ Malaysia | ■ Slovenia | |
| ■ Finland | ■ Morocco | ■ South Africa | |
| ■ France | ■ Nepal | ■ South Korea | |

II. Target Market Matrix

A. HS 9018: U.S. Medical, Surgical, Dental and Veterinary Instruments and Appliances (Including Electro-Medical and Sight-Testing) & Parts

This matrix assesses the U.S. industry's market potential in each listed country, based on how well the country performed against the 11 "predictor" criteria represented in Columns 1-11 below. A **double X** in the Column cell indicates the country met the criterion very well; a **single X** indicates reasonably good performance; a **blank** indicates the country was lacking in that criterion. The countries with the greatest number of XX's and X's across the most number of criteria are presumed to offer greater export potential for the industry, based on this methodology.

Selection Criteria

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|----------------------|----|----|----|----|----|----|----|----|----|----|----|
| Australia | X | XX | | | XX | | | XX | XX | XX | XX |
| Belgium | X | XX | XX | X | X | | X | | | | |
| Brazil | | XX | X | | | XX | | X | XX | XX | XX |
| Canada | XX | | | | | | | XX | XX | XX | XX |
| China | | XX | | | X | | | X | XX | X | XX |
| Colombia | | X | XX | | | | | | | | |
| Costa Rica | | X | XX | | | | | XX | XX | XX | XX |
| Denmark | | | XX | | | | | | X | | XX |
| Dominican Rep | | | | | | | | | | | |
| France | X | | | X | | | X | | XX | X | XX |
| Germany | XX | | X | XX | | | XX | | X | X | XX |
| Hong Kong | | | | | | | | | X | XX | |
| India | | | | | | XX | | XX | XX | XX | XX |
| Ireland | | | | | | X | | X | XX | X | XX |
| Israel | | | | | | | | X | X | X | XX |
| Italy | | XX | | X | | X | X | X | XX | X | XX |
| Japan | XX | | | XX | | | XX | | XX | | XX |
| Korea | | | X | | | X | | X | X | X | |
| Mexico | XX | | | | X | XX | | XX | XX | X | |
| Netherlands | XX | XX | | XX | XX | XX | XX | | X | X | XX |
| Saudi Arabia | | | | | X | | | | | | |
| Singapore | | | XX | | XX | XX | | XX | XX | X | |
| South Africa | | X | | | X | | | XX | XX | X | XX |
| Spain | | XX | X | | | | | X | X | X | XX |
| Sweden | | | | | | | | | X | X | XX |
| Switzerland | | | | | | | | X | X | X | XX |
| Taiwan | | | | | | | | XX | XX | XX | XX |
| Turkey | | X | | | XX | XX | | XX | X | X | XX |
| U.K. | X | | | XX | XX | X | XX | | | X | |
| Venezuela | | X | X | | | | | XX | XX | X | |

Key: Columns/Criteria

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Largest export markets, latest year 2. Fastest growing export markets, past 3 yrs 3. Fastest growing export markets, latest year 4. Largest importing countries, latest year 5. Fastest growing importing countries, past 3 yrs 6. Fastest growing importing countries, latest yr | <ol style="list-style-type: none"> 7. Strong share of import market, latest year 8. Limited competition from local producers 9. High receptivity to products from your country 10. No significant market barriers 11. Recommended as a "best" export market |
|---|--|

II. Target Market Matrix

B. HS 9019: Mechano-therapy, Massage, Psychological Aptitude-Testing Appliances and Apparatus; Ozone Etc. Therapy and Respiration Apparatus; Parts and Accessories

This matrix assesses the U.S. industry's market potential in each listed country, based on how well the country performed against the 11 "predictor" criteria represented in Columns 1-11 below. A **double X** in the Column cell indicates the country met the criterion very well; a **single X** indicates reasonably good performance; a **blank** indicates the country was lacking in that criterion. The countries with the greatest number of XX's and X's across the most number of criteria are presumed to offer greater export potential for the industry, based on this methodology.

Selection Criteria

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|---------------------|----|----|----|----|----|----|----|----|----|----|----|
| Australia | X | XX | | | X | | | XX | XX | XX | XX |
| Austria | | | | | | | | XX | X | X | XX |
| Belgium | X | | X | X | XX | | X | | | | |
| Brazil | | | X | | | | | X | XX | XX | XX |
| Canada | XX | XX | | XX | | X | XX | XX | XX | XX | XX |
| China | | XX | XX | | | | | X | XX | X | XX |
| Colombia | | | | | | | | | | | |
| France | X | | | XX | XX | X | XX | | XX | X | XX |
| Germany | XX | | | XX | | X | XX | | X | X | XX |
| Hong Kong | | | X | X | | | X | | X | XX | |
| Iceland | | X | XX | | | | | | | | |
| India | | X | X | | | | | XX | XX | XX | XX |
| Ireland | X | | | | | | | X | XX | X | XX |
| Italy | | | | X | | | X | X | XX | X | XX |
| Japan | XX | | | XX | | | XX | | XX | | XX |
| Jordan | | X | XX | | | | | XX | X | X | XX |
| Korea | | | | | XX | XX | | X | X | X | |
| Mexico | X | | | | | | | XX | XX | X | |
| Netherlands | X | | | X | | | X | | X | X | XX |
| New Zealand | | | | | | | | XX | XX | X | XX |
| Russia | | | | | | | | XX | X | X | XX |
| Saudi Arabia | | | | | | | | | | | |
| Singapore | | | | | X | XX | | XX | XX | X | |
| South Africa | | | | | X | XX | | XX | XX | X | XX |
| Spain | | | | | | X | | X | X | X | XX |
| Taiwan | | | | | | | | XX | XX | X | XX |
| Turkey | | X | | | XX | XX | | XX | X | X | XX |
| U.K. | XX | XX | | XX | XX | | XX | | | X | |
| Venezuela | | X | XX | | | | | XX | XX | X | |
| Vietnam | | X | XX | | | | | XX | XX | X | |

Key: Columns/Criteria

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Largest export markets, latest year 2. Fastest growing export markets, past 3 yrs 3. Fastest growing export markets, latest year 4. Largest importing countries, latest year 5. Fastest growing importing countries, past 3 yrs 6. Fastest growing importing countries, latest yr | <ol style="list-style-type: none"> 7. Strong share of import market, latest year 8. Limited competition from local producers 9. High receptivity to products from your country 10. No significant market barriers 11. Recommended as a "best" export market |
|---|--|

II. Target Market Matrix

C. HS 9021: Orthopedic Appliances; Splints etc.; Artificial Parts of the Body; Hearing Aids and Other Appliances to compensate for a Defect etc.; Parts etc.

This matrix assesses the U.S. industry's market potential in each listed country, based on how well the country performed against the 11 "predictor" criteria represented in Columns 1-11 below. A **double X** in the Column cell indicates the country met the criterion very well; a **single X** indicates reasonably good performance; a **blank** indicates the country was lacking in that criterion. The countries with the greatest number of XX's and X's across the most number of criteria are presumed to offer greater export potential for the industry, based on this methodology.

Selection Criteria

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|---------------------|----|----|----|----|----|----|----|----|----|----|----|
| Argentina | | | | | | | | XX | XX | X | XX |
| Australia | X | XX | | | X | X | | XX | XX | XX | XX |
| Belgium | | X | X | | | | | | | | |
| Brazil | | | XX | | X | XX | | X | XX | XX | XX |
| Canada | XX | | X | | | X | | XX | XX | XX | XX |
| Chile | | | | | | | | XX | XX | XX | XX |
| China | | X | X | | XX | XX | | X | XX | X | XX |
| Colombia | | X | XX | | | | | | | | |
| Costa Rica | | | | | | | | XX | XX | XX | XX |
| Denmark | | | | | | | | | X | | XX |
| France | X | | | XX | XX | X | XX | | XX | X | XX |
| Germany | X | | | XX | | X | XX | | X | X | XX |
| Greece | | | | | XX | | | XX | X | X | XX |
| Hong Kong | | | | | | | | | X | XX | |
| India | | X | XX | | | | | XX | XX | XX | XX |
| Ireland | XX | | | X | | | X | X | XX | X | XX |
| Italy | | | | X | | | X | X | XX | X | XX |
| Japan | XX | | | X | | | X | | XX | | XX |
| Korea | | | | | | | | X | X | X | |
| Mexico | X | XX | X | | | | | XX | XX | X | |
| Netherlands | XX | XX | X | XX | X | | XX | | X | X | XX |
| Singapore | | | | | XX | XX | | XX | XX | X | |
| South Africa | | | | | XX | XX | | XX | XX | X | XX |
| Spain | | | | | | | | X | X | X | XX |
| Sweden | XX | XX | | | | | | | X | X | XX |
| Switzerland | XX | XX | | | | | | X | X | X | XX |
| Taiwan | | | | | | | | XX | XX | X | XX |
| Turkey | | X | XX | | X | XX | | XX | X | X | XX |
| U.K. | X | | | X | X | | X | | | X | |
| Venezuela | | X | XX | | | | | XX | XX | X | |

Key: Columns/Criteria

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Largest export markets, latest year 2. Fastest growing export markets, past 3 yrs 3. Fastest growing export markets, latest year 4. Largest importing countries, latest year 5. Fastest growing importing countries, past 3 yrs 6. Fastest growing importing countries, latest yr | <ol style="list-style-type: none"> 7. Strong share of import market, latest year 8. Limited competition from local producers 9. High receptivity to products from your country 10. No significant market barriers 11. Recommended as a "best" export market |
|---|--|

II. Target Market Matrix

D. HS 9022: X-ray etc. Apparatus, including Radiography or Radiotherapy Apparatus, X-ray Tubes and Generators, High Tension Generators etc.; Parts and Accessories

This matrix assesses the U.S. industry's market potential in each listed country, based on how well the country performed against the 11 "predictor" criteria represented in Columns 1-11 below. A **double X** in the Column cell indicates the country met the criterion very well; a **single X** indicates reasonably good performance; a **blank** indicates the country was lacking in that criterion. The countries with the greatest number of XX's and X's across the most number of criteria are presumed to offer greater export potential for the industry, based on this methodology.

Selection Criteria

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|--------------------|----|----|----|----|----|----|----|----|----|----|----|
| Argentina | | X | | | | | | XX | XX | X | XX |
| Australia | | | X | | X | X | | XX | XX | XX | XX |
| Belgium | | XX | X | | X | XX | | | | | |
| Brazil | | | | | | XX | | X | XX | XX | XX |
| Canada | XX | | | X | | XX | X | XX | XX | XX | XX |
| Chile | | | XX | | | | | XX | XX | XX | XX |
| China | XX | | | XX | X | X | XX | X | XX | X | XX |
| Colombia | | | | | | | | | | | |
| Denmark | | X | XX | | | | | | X | | XX |
| Finland | | | X | | | XX | | X | X | X | XX |
| France | XX | | | XX | | | XX | | X | X | XX |
| Germany | XX | | | XX | | | XX | | X | X | XX |
| Hong Kong | | | | | | X | | | X | XX | |
| India | | | | | | X | | XX | XX | XX | XX |
| Israel | X | XX | | | X | | | X | X | X | XX |
| Italy | X | | | X | | | X | X | XX | X | XX |
| Japan | XX | | | XX | | | XX | | XX | | XX |
| Korea | | XX | | X | X | | X | X | X | X | |
| Luxembourg | | X | XX | | | | | | | | |
| Mexico | X | XX | X | | | | | XX | XX | X | |
| Netherlands | X | | | XX | XX | X | XX | | X | X | XX |
| Singapore | | | | | XX | X | | XX | XX | X | |
| Spain | | | | | | | | X | X | X | XX |
| Sweden | | | XX | | | | | | X | X | XX |
| Switzerland | | | | | | | | X | X | X | XX |
| Taiwan | | | X | | | | | XX | XX | X | XX |
| Turkey | | X | | | XX | XX | | XX | X | X | XX |
| U.K. | X | | | X | | XX | X | | | X | |
| UAE | | X | XX | | | | | XX | X | XX | XX |
| Venezuela | | | | | | | | XX | XX | X | |

Key: Columns/Criteria

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Largest export markets, latest year 2. Fastest growing export markets, past 3 yrs 3. Fastest growing export markets, latest year 4. Largest importing countries, latest year 5. Fastest growing importing countries, past 3 yrs 6. Fastest growing importing countries, latest yr | <ol style="list-style-type: none"> 7. Strong share of import market, latest year 8. Limited competition from local producers 9. High receptivity to products from your country 10. No significant market barriers 11. Recommended as a "best" export market |
|---|--|

III. Market Potential Indicators

A. Top 30 U.S. Export Markets for Medical Equipment & Supplies, 2003-06, by Country. These tables show the leading and fastest growing markets for U.S. Medical Equipment & Supplies. Source: U.S Census Bureau.

1. Medical, Surgical, Dental, Veterinary Instrs & Appliance (HS 9018)
2. Mechano-Therapy, Respiration Apparatus, etc, & Parts (HS 9019)
3. Orthopedic Appliances; Hearing Aids , etc. & Parts (HS 9021)
4. X-Ray, Radiography/Radiotherapy Apparatus, etc. & Parts (HS 9022)

B. Top 30 World Importers of Medical Equipment & Supplies, 2002-2005, by Country. These tables show the leading and fastest growing world importers of U.S. Medical Equipment & Supplies. Source: United Nations COMTRADE.

1. Medical, Surgical, Dental, Veterinary Instrs & Appliance (HS 9018)
2. Mechano-Therapy, Respiration Apparatus, etc, & Parts (HS 9019)
3. Orthopedic Appliances; Hearing Aids , etc. & Parts (HS 9021)
4. X-Ray, Radiography/Radiotherapy Apparatus, etc. & Parts (HS 9022)

C. Top 30 World Exporters of Medical Equipment & Supplies & U.S. Share, 2002-05, by Country. These tables show the U.S. and competitor-country shares of total world exports of U.S. Medical Equipment & Supplies. Source: United Nations COMTRADE.

1. Medical, Surgical, Dental, Veterinary Instrs & Appliance (HS 9018)
2. Mechano-Therapy, Respiration Apparatus, etc, & Parts (HS 9019)
3. Orthopedic Appliances; Hearing Aids , etc. & Parts (HS 9021)
4. X-Ray, Radiography/Radiotherapy Apparatus, etc. & Parts (HS 9022)

D. Market Sizes & U.S. Share: U.S. Medical Equipment & Supplies, 2003-2005, by Country. This table shows each “best prospect” country’s total market, total imports, imports from the U.S., and the U.S. market share for products in this sector. Source: U.S. Commercial Staff in each country.

III. Market Potential Indicators

III .A. Top 30 U.S. Export Markets 2003–2006 (Values in \$ Thousands)

1. HS 9018: Instruments And Appliances Used In Medical, Surgical, Dental Or Veterinary Sciences (Including Electro-Medical And Sight-Testing); Parts Etc.

| Country | 2003 | 2004 | 2005 | 2006 | % | % | % |
|-------------------|-------------------|-------------------|-------------------|-------------------|------------|---------------|-------------|
| | | | | | Change | Change | Share |
| | | | | | 2003-06 | 2005-06 | 2006 |
| Netherlands | 1,308,140 | 1,531,066 | 1,819,253 | 1,998,894 | 53% | 9.90% | 13% |
| Japan | 1,603,733 | 1,731,509 | 1,878,826 | 1,900,182 | 18% | 1.10% | 12% |
| Germany | 1,211,330 | 1,105,653 | 1,334,834 | 1,649,355 | 36% | 23.60% | 10% |
| Canada | 969,270 | 1,108,043 | 1,210,116 | 1,338,511 | 38% | 10.60% | 8% |
| Mexico | 906,437 | 932,780 | 991,055 | 1,106,949 | 22% | 11.70% | 7% |
| Belgium | 389,721 | 615,620 | 673,956 | 871,511 | 124% | 29.30% | 5% |
| U.K. | 530,524 | 627,811 | 713,632 | 774,873 | 46% | 8.60% | 5% |
| France | 468,297 | 526,272 | 616,238 | 663,154 | 42% | 7.60% | 4% |
| Australia | 350,047 | 429,814 | 504,526 | 569,529 | 63% | 12.90% | 4% |
| Italy | 301,015 | 349,717 | 406,366 | 462,707 | 54% | 13.90% | 3% |
| China | 256,530 | 319,960 | 397,469 | 377,391 | 47% | -5.10% | 2% |
| Korea | 253,483 | 242,136 | 286,826 | 354,274 | 40% | 23.50% | 2% |
| Brazil | 144,020 | 178,436 | 228,156 | 278,522 | 93% | 22.10% | 2% |
| Spain | 164,035 | 189,686 | 215,693 | 258,783 | 58% | 20.00% | 2% |
| Switzerland | 161,721 | 150,800 | 187,977 | 215,795 | 33% | 14.80% | 1% |
| Ireland | 217,045 | 225,565 | 207,544 | 210,612 | -3% | 1.50% | 1% |
| Hong Kong | 174,436 | 161,081 | 189,469 | 205,464 | 18% | 8.40% | 1% |
| Singapore | 88,730 | 126,570 | 138,641 | 183,855 | 107% | 32.60% | 1% |
| India | 95,609 | 117,859 | 133,663 | 159,378 | 67% | 19.20% | 1% |
| Denmark | 64,808 | 88,284 | 111,035 | 143,253 | 121% | 29.00% | 1% |
| Taiwan | 111,135 | 132,953 | 135,006 | 135,906 | 22% | 0.70% | 1% |
| South Africa | 61,477 | 72,848 | 98,708 | 104,806 | 70% | 6.20% | 1% |
| Venezuela | 21,617 | 51,341 | 84,637 | 102,005 | 372% | 20.50% | 1% |
| Sweden | 94,118 | 95,668 | 95,496 | 101,265 | 8% | 6.00% | 1% |
| Colombia | 38,026 | 48,743 | 70,439 | 97,616 | 157% | 38.60% | 1% |
| Israel | 83,574 | 81,078 | 86,747 | 97,463 | 17% | 12.40% | 1% |
| Costa Rica | 35,106 | 41,398 | 71,359 | 96,782 | 176% | 35.60% | 1% |
| Dominican Rep | 82,515 | 90,760 | 91,089 | 86,092 | 4% | -5.50% | 1% |
| Turkey | 42,824 | 53,381 | 80,589 | 85,101 | 99% | 5.60% | 1% |
| Saudi Arabia | 57,567 | 58,036 | 69,062 | 82,133 | 43% | 18.90% | 1% |
| | | | | | | | |
| Subtotal : | 10,286,890 | 11,484,869 | 13,128,405 | 14,712,160 | 43% | 12.10% | 93% |
| All Other: | 703,986 | 818,108 | 999,439 | 1,147,132 | 63% | 14.80% | 7% |
| Total | 10,990,876 | 12,302,978 | 14,127,844 | 15,859,292 | 44% | 12.30% | 100% |

Source: US Census Bureau

III. Market Potential Indicators

III .A. Top 30 U.S. Export Markets 2003–2006 (Values in \$ Thousands)

2. HS 9019: Mechano-Therapy, Massage, Psychological Aptitude-Testing Appliances & Apparatus; Ozone Etc. Therapy And Respiration Apparatus; Parts & Accessories

| Country | 2003 | 2004 | 2005 | 2006 | % Change | % Change | % Share |
|-------------------|----------------|----------------|----------------|----------------|------------|---------------|-------------|
| | | | | | 2003-06 | 2005-06 | 2006 |
| Canada | 105,528 | 137,775 | 173,106 | 214,776 | 104% | 24.10% | 23% |
| U.K. | 53,029 | 89,469 | 99,507 | 125,819 | 137% | 26.40% | 13% |
| Japan | 69,315 | 58,190 | 80,254 | 77,052 | 11% | -4.00% | 8% |
| Germany | 36,613 | 37,821 | 57,871 | 59,155 | 62% | 2.20% | 6% |
| Belgium | 23,476 | 28,159 | 27,759 | 38,930 | 66% | 40.20% | 4% |
| France | 24,653 | 30,519 | 33,518 | 36,791 | 49% | 9.80% | 4% |
| Australia | 18,227 | 21,912 | 30,367 | 35,601 | 95% | 17.20% | 4% |
| Netherlands | 21,186 | 23,627 | 27,229 | 30,287 | 43% | 11.20% | 3% |
| Mexico | 33,505 | 36,453 | 33,236 | 30,117 | -10% | -9.40% | 3% |
| Ireland | 21,394 | 24,069 | 27,867 | 26,773 | 25% | -3.90% | 3% |
| China | 7,976 | 8,417 | 6,840 | 17,857 | 124% | 161.00% | 2% |
| Spain | 31,568 | 13,568 | 14,610 | 16,718 | -47% | 14.40% | 2% |
| Hong Kong | 21,841 | 18,773 | 10,767 | 15,906 | -27% | 47.70% | 2% |
| Italy | 13,002 | 11,750 | 11,843 | 13,591 | 5% | 14.80% | 1% |
| Brazil | 5,801 | 7,715 | 9,163 | 12,343 | 113% | 34.70% | 1% |
| Korea | 7,201 | 7,244 | 9,853 | 11,204 | 56% | 13.70% | 1% |
| India | 4,525 | 5,549 | 7,156 | 9,818 | 117% | 37.20% | 1% |
| Turkey | 4,198 | 6,739 | 9,214 | 9,787 | 133% | 6.20% | 1% |
| Austria | 6,858 | 5,561 | 6,980 | 8,641 | 26% | 23.80% | 1% |
| Taiwan | 14,701 | 9,698 | 7,435 | 8,313 | -43% | 11.80% | 1% |
| New Zealand | 3,933 | 5,354 | 7,850 | 7,539 | 92% | -4.00% | 1% |
| South Africa | 6,117 | 10,465 | 8,172 | 7,346 | 20% | -10.10% | 1% |
| Singapore | 5,342 | 5,151 | 8,527 | 7,301 | 37% | -14.40% | 1% |
| Russia | 5,622 | 5,420 | 6,093 | 7,200 | 28% | 18.20% | 1% |
| Iceland | 299 | 644 | 1,299 | 6,874 | 2199% | 429.10% | 1% |
| Venezuela | 2,005 | 1,537 | 3,156 | 6,703 | 234% | 112.40% | 1% |
| Saudi Arabia | 4,228 | 7,989 | 5,987 | 6,586 | 56% | 10.00% | 1% |
| Colombia | 3,435 | 4,618 | 6,673 | 6,328 | 84% | -5.20% | 1% |
| Vietnam | 2,881 | 1,265 | 2,252 | 6,256 | 117% | 177.80% | 1% |
| Jordan | 938 | 869 | 894 | 6,063 | 546% | 578.00% | 1% |
| | | | | | | | |
| Subtotal : | 559,396 | 626,319 | 735,478 | 867,676 | 55% | 18.00% | 91% |
| All Other: | 83,763 | 83,512 | 79,363 | 83,876 | 0% | 5.70% | 9% |
| Total | 643,159 | 709,831 | 814,841 | 951,552 | 48% | 16.80% | 100% |

Source: US Census Bureau

III. Market Potential Indicators

III .A. Top 30 U.S. Export Markets 2003–2006 (Values in \$ Thousands)

3. HS 9021: Orthopedic Appliances; Splints Etc.; Artificial Parts Of The Body; Hearing Aids And Other Appliances To Compensate For A Defect Etc.; Parts Etc.

| Country | 2003 | 2004 | 2005 | 2006 | % | % | % |
|-------------------|------------------|------------------|------------------|------------------|---------------|---------------|-------------|
| | | | | | Change | Change | Share |
| | | | | | 2003-06 | 2005-06 | 2006 |
| Netherlands | 304,044 | 399,388 | 596,918 | 867,509 | 185.32% | 45.30% | 15% |
| Ireland | 1,090,402 | 1,147,787 | 1,164,753 | 830,852 | -23.80% | -28.70% | 15% |
| Japan | 484,554 | 527,550 | 513,718 | 585,587 | 20.85% | 14.00% | 10% |
| Switzerland | 296,710 | 313,303 | 363,818 | 451,373 | 52.13% | 24.10% | 8% |
| Canada | 286,309 | 347,593 | 381,275 | 427,114 | 49.18% | 12.00% | 8% |
| Sweden | 181,650 | 193,314 | 248,095 | 345,380 | 90.13% | 39.20% | 6% |
| Germany | 176,756 | 189,618 | 207,082 | 253,835 | 43.61% | 22.60% | 4% |
| U.K. | 241,964 | 241,961 | 273,104 | 221,886 | -8.30% | -18.80% | 4% |
| Australia | 109,152 | 123,350 | 171,380 | 210,872 | 93.19% | 23.00% | 4% |
| France | 155,903 | 169,186 | 170,679 | 199,520 | 27.98% | 16.90% | 4% |
| Mexico | 83,891 | 103,904 | 125,367 | 182,920 | 118.04% | 45.90% | 3% |
| Belgium | 53,060 | 47,947 | 80,746 | 115,964 | 118.55% | 43.60% | 2% |
| Italy | 83,521 | 94,356 | 91,837 | 97,332 | 16.54% | 6.00% | 2% |
| Korea | 49,661 | 57,438 | 69,896 | 85,998 | 73.17% | 23.00% | 2% |
| Spain | 67,541 | 69,039 | 69,957 | 81,746 | 21.03% | 16.90% | 1% |
| China | 25,471 | 44,020 | 52,614 | 73,722 | 189.44% | 40.10% | 1% |
| Brazil | 33,992 | 40,987 | 47,930 | 72,967 | 114.66% | 52.20% | 1% |
| Hong Kong | 57,804 | 54,635 | 37,608 | 49,976 | -13.54% | 32.90% | 1% |
| Colombia | 14,488 | 20,206 | 21,585 | 33,368 | 130.31% | 54.60% | 1% |
| Turkey | 12,915 | 12,691 | 19,986 | 33,059 | 155.97% | 65.40% | 1% |
| Taiwan | 15,566 | 21,184 | 24,223 | 31,476 | 102.21% | 29.90% | 1% |
| Denmark | 34,553 | 35,242 | 33,843 | 30,434 | -11.92% | -10.10% | 1% |
| India | 7,486 | 10,761 | 13,475 | 27,607 | 268.78% | 104.90% | 0% |
| Singapore | 19,413 | 19,012 | 21,357 | 27,243 | 40.33% | 27.60% | 0% |
| Argentina | 13,347 | 16,950 | 19,392 | 24,415 | 82.93% | 25.90% | 0% |
| Costa Rica | 29,800 | 22,283 | 26,786 | 20,345 | -31.73% | -24.00% | 0% |
| South Africa | 9,465 | 12,788 | 17,237 | 19,990 | 111.20% | 16.00% | 0% |
| Greece | 17,587 | 22,608 | 18,829 | 18,435 | 4.82% | -2.10% | 0% |
| Venezuela | 2,750 | 5,830 | 8,232 | 17,521 | 537.13% | 112.90% | 0% |
| Chile | 7,764 | 10,938 | 15,374 | 16,964 | 118.50% | 10.30% | 0% |
| | | | | | | | |
| Subtotal : | 3,967,523 | 4,375,871 | 4,907,094 | 5,455,412 | 37.50% | 11.20% | 97% |
| All Other: | 128,339 | 153,726 | 155,390 | 191,005 | 48.83% | 22.90% | 3% |
| Total | 4,095,862 | 4,529,597 | 5,062,484 | 5,646,418 | 37.86% | 11.50% | 100% |

Source: US Census Bureau

III. Market Potential Indicators

III .A. Top 30 U.S. Export Markets 2003–2006 (Values in \$ Thousands)

4. HS 9022: X-Ray Etc. Apparatus, Including Radiography or Radiotherapy Apparatus, X-Ray Tubes & Generators, High Tension Generators Etc.; Parts & Accessories

| Country | 2003 | 2004 | 2005 | 2006 | % Change | % Change | % Share |
|-------------------|------------------|------------------|------------------|------------------|------------|---------------|-------------|
| | | | | | 2003-06 | 2005-06 | 2006 |
| Japan | 282,532 | 343,588 | 411,239 | 449,851 | 59% | 9.40% | 14% |
| Germany | 342,801 | 382,389 | 306,809 | 378,816 | 11% | 23.50% | 12% |
| France | 287,299 | 240,276 | 253,394 | 268,536 | -7% | 6.00% | 9% |
| Canada | 166,326 | 162,501 | 222,169 | 229,609 | 38% | 3.30% | 7% |
| China | 180,098 | 140,695 | 168,904 | 180,646 | 0% | 7.00% | 6% |
| Mexico | 74,568 | 91,544 | 118,182 | 152,552 | 105% | 29.10% | 5% |
| Netherlands | 87,263 | 81,476 | 122,650 | 144,100 | 65% | 17.50% | 5% |
| U.K. | 89,523 | 104,016 | 132,674 | 133,918 | 50% | 0.90% | 4% |
| Israel | 25,440 | 57,814 | 101,237 | 107,144 | 321% | 5.80% | 3% |
| Italy | 55,550 | 58,511 | 82,616 | 79,009 | 42% | -4.40% | 3% |
| Brazil | 89,882 | 87,297 | 92,541 | 77,903 | -13% | -15.80% | 2% |
| Korea | 32,194 | 41,607 | 62,190 | 74,439 | 131% | 19.70% | 2% |
| Australia | 42,833 | 50,333 | 43,333 | 70,088 | 64% | 61.70% | 2% |
| India | 42,069 | 67,087 | 56,906 | 66,940 | 59% | 17.60% | 2% |
| Belgium | 31,845 | 44,369 | 45,551 | 61,981 | 95% | 36.10% | 2% |
| Singapore | 59,564 | 39,738 | 90,327 | 59,803 | 0% | -33.80% | 2% |
| Spain | 45,683 | 33,977 | 44,510 | 56,759 | 24% | 27.50% | 2% |
| Taiwan | 20,105 | 20,759 | 31,999 | 42,193 | 110% | 31.90% | 1% |
| Hong Kong | 20,254 | 24,186 | 37,377 | 38,142 | 88% | 2.00% | 1% |
| Switzerland | 24,836 | 33,338 | 25,045 | 31,042 | 25% | 23.90% | 1% |
| Turkey | 6,661 | 14,917 | 28,191 | 28,936 | 334% | 2.60% | 1% |
| Luxembourg | 117 | 14 | 6 | 25,268 | 21497% | 451121.80% | 1% |
| Finland | 10,883 | 11,604 | 18,334 | 24,256 | 123% | 32.30% | 1% |
| UAE | 2,770 | 5,959 | 11,696 | 20,252 | 631% | 73.20% | 1% |
| Sweden | 14,254 | 12,199 | 11,234 | 19,619 | 38% | 74.60% | 1% |
| Chile | 7,255 | 13,549 | 10,264 | 18,442 | 154% | 79.70% | 1% |
| Denmark | 3,843 | 12,838 | 8,545 | 18,372 | 378% | 115.00% | 1% |
| Colombia | 7,422 | 9,578 | 16,053 | 17,901 | 141% | 11.50% | 1% |
| Argentina | 3,394 | 4,078 | 15,580 | 17,313 | 410% | 11.10% | 1% |
| Venezuela | 5,438 | 21,975 | 27,955 | 17,056 | 214% | -39.00% | 1% |
| Subtotal : | 2,062,705 | 2,212,214 | 2,597,507 | 2,910,887 | 41% | 12.10% | 92% |
| All Other: | 158,241 | 195,587 | 271,014 | 248,307 | 57% | -8.40% | 8% |
| Total | 2,220,946 | 2,407,801 | 2,868,521 | 3,159,194 | 42% | 10.10% | 100% |

Source: US Census Bureau

III. Market Potential Indicators

III .B. Top 30 World Importers, 2002–2005

1. HS 9018: Instruments And Appliances Used In Medical, Surgical, Dental Or Veterinary Sciences (Including Electro-Medical And Sight-Testing); Parts Etc.

| Country | 2002 | 2003 | 2004 | 2005 | % Change | % Change | % Share |
|---------------------|-------------------------|-------------------------|-------------------------|-------------------------|------------|------------|-------------|
| | | | | | 2002-05 | 2004-05 | 2005 |
| USA | \$7,580,988,968 | \$9,017,096,924 | \$11,078,121,207 | \$12,191,229,489 | 60.8% | 10.0% | 23.4% |
| Germany | \$2,984,254,720 | \$3,484,382,000 | \$4,287,450,000 | \$4,528,936,000 | 51.8% | 5.6% | 8.7% |
| Netherlands | \$2,381,316,534 | \$3,026,308,107 | \$3,336,580,243 | \$4,402,223,990 | 84.9% | 31.9% | 8.4% |
| Japan | \$2,816,215,998 | \$2,954,638,059 | \$3,344,306,665 | \$3,753,598,440 | 33.3% | 12.2% | 7.2% |
| U.K. | \$1,809,012,736 | \$2,302,132,737 | \$3,011,767,188 | \$3,730,769,724 | 106.2% | 23.9% | 7.2% |
| France | \$1,806,855,168 | \$2,159,342,592 | \$2,485,546,051 | \$2,679,916,012 | 48.3% | 7.8% | 5.1% |
| Italy | \$1,472,404,864 | \$1,650,604,025 | \$2,012,183,687 | \$2,390,012,736 | 62.3% | 18.8% | 4.6% |
| Belgium | \$1,268,785,675 | \$1,594,986,063 | \$2,024,406,033 | \$2,224,827,751 | 75.4% | 9.9% | 4.3% |
| Canada | \$1,057,453,265 | \$1,236,838,205 | \$1,437,264,316 | \$1,587,943,000 | 50.2% | 10.5% | 3.0% |
| China | \$810,124,419 | \$1,058,294,337 | \$1,289,570,745 | \$1,409,879,274 | 74.0% | 9.3% | 2.7% |
| Spain | \$882,680,192 | \$1,087,283,048 | \$1,266,388,563 | \$1,381,756,852 | 56.5% | 9.1% | 2.7% |
| Mexico | \$743,084,736 | \$951,346,549 | \$1,033,641,732 | \$1,320,149,314 | 77.7% | 27.7% | 2.5% |
| Australia | \$553,644,288 | \$666,358,016 | \$869,707,577 | \$1,006,388,225 | 81.8% | 15.7% | 1.9% |
| Singapore | \$289,622,952 | \$424,632,709 | \$667,111,922 | \$849,721,042 | 193.4% | 27.4% | 1.6% |
| Switzerland | \$533,859,648 | \$665,210,880 | \$741,334,699 | \$821,295,083 | 53.8% | 10.8% | 1.6% |
| Korea | \$536,087,904 | \$576,515,200 | \$656,396,010 | \$790,026,415 | 47.4% | 20.4% | 1.5% |
| China, Hong Kong | \$546,009,644 | \$578,534,815 | \$731,200,494 | \$787,887,808 | 44.3% | 7.8% | 1.5% |
| Russia | \$439,691,003 | \$571,277,522 | \$588,794,732 | \$704,695,941 | 60.3% | 19.7% | 1.4% |
| Austria | \$402,496,231 | \$481,533,615 | \$552,484,324 | \$619,646,269 | 54.0% | 12.2% | 1.2% |
| Turkey | \$247,355,275 | \$314,032,621 | \$465,113,127 | \$614,655,029 | 148.5% | 32.2% | 1.2% |
| India * | N/A | \$361,761,186 | \$440,485,278 | \$604,348,676 | 67.1% | 37.2% | 1.2% |
| Sweden | \$451,090,944 | \$476,863,616 | \$572,145,829 | \$585,430,806 | 29.8% | 2.3% | 1.1% |
| Denmark | \$327,933,376 | \$375,999,200 | \$466,093,588 | \$527,810,313 | 61.0% | 13.2% | 1.0% |
| Ireland | \$425,542,624 | \$350,365,760 | \$376,444,635 | \$465,001,258 | 9.3% | 23.5% | 0.9% |
| Poland | \$201,244,000 | \$230,314,000 | \$310,978,149 | \$380,510,942 | 89.1% | 22.4% | 0.7% |
| Greece | \$183,993,664 | \$312,450,624 | \$453,931,287 | \$379,308,163 | 106.2% | -16.4% | 0.7% |
| South Africa | \$220,854,688 | \$254,038,400 | \$323,998,682 | \$377,064,541 | 70.7% | 16.4% | 0.7% |
| Brazil | \$295,749,280 | \$227,594,486 | \$292,976,324 | \$373,974,653 | 26.4% | 27.6% | 0.7% |
| Norway | \$240,676,256 | \$253,061,771 | \$283,197,959 | \$321,310,156 | 33.5% | 13.5% | 0.6% |
| Saudi Arabia | \$176,017,619 | \$248,714,314 | \$270,757,768 | \$312,030,232 | 77.3% | 15.2% | 0.6% |
| TOTAL | \$31,685,046,671 | \$37,892,511,381 | \$45,670,378,814 | \$52,122,348,134 | 65% | 14% | 100% |

Source: United Nations COMTRADE

* Percent Change 2003-05, instead of Percent Change 2002-05

III. Market Potential Indicators

III .B. Top 30 World Importers, 2002–2005

2. HS 9019: Mechano-Therapy, Massage, Psychological Aptitude-Testing Appliances & Apparatus; Ozone Etc. Therapy And Respiration Apparatus; Parts & Accessories

| Country | 2002 | 2003 | 2004 | 2005 | % Change | % Change | % Share |
|------------------|------------------------|------------------------|------------------------|------------------------|--------------|--------------|---------------|
| | | | | | 2002-05 | 2004-05 | 2005 |
| USA | \$883,808,425 | \$1,038,056,011 | \$1,170,998,343 | \$1,327,080,874 | 50.2% | 13.3% | 29.0% |
| Japan | \$324,907,354 | \$359,063,813 | \$384,579,924 | \$416,274,441 | 28.1% | 8.2% | 9.1% |
| U.K. | \$151,312,256 | \$184,344,428 | \$302,904,698 | \$333,175,020 | 120.2% | 10.0% | 7.3% |
| Germany | \$180,737,856 | \$206,243,000 | \$215,752,000 | \$271,804,000 | 50.4% | 26.0% | 5.9% |
| France | \$118,631,264 | \$166,947,360 | \$194,652,611 | \$242,734,507 | 104.6% | 24.7% | 5.3% |
| Canada | \$141,859,659 | \$144,798,599 | \$187,838,869 | \$238,050,423 | 67.8% | 26.7% | 5.2% |
| China, Hong Kong | \$180,399,481 | \$205,443,383 | \$176,879,873 | \$192,280,287 | 6.6% | 8.7% | 4.2% |
| Belgium | \$57,089,722 | \$111,942,988 | \$149,419,249 | \$166,714,277 | 192.0% | 11.6% | 3.6% |
| Netherlands | \$99,210,675 | \$118,959,032 | \$130,100,423 | \$141,285,024 | 42.4% | 8.6% | 3.1% |
| Italy | \$89,887,208 | \$111,726,571 | \$126,438,875 | \$133,182,679 | 48.2% | 5.3% | 2.9% |
| Spain | \$69,033,464 | \$78,886,160 | \$79,160,584 | \$101,942,617 | 47.7% | 28.8% | 2.2% |
| China | \$56,805,817 | \$136,824,330 | \$93,130,313 | \$98,987,084 | 74.3% | 6.3% | 2.2% |
| Russia | \$54,949,550 | \$104,692,553 | \$108,827,998 | \$89,538,873 | 62.9% | -17.7% | 2.0% |
| Australia | \$43,491,560 | \$52,765,428 | \$74,775,487 | \$85,363,282 | 96.3% | 14.2% | 1.9% |
| Switzerland | \$49,141,668 | \$57,826,152 | \$65,052,796 | \$74,624,735 | 51.9% | 14.7% | 1.6% |
| Korea | \$26,528,804 | \$32,999,584 | \$38,560,638 | \$67,885,624 | 155.9% | 76.0% | 1.5% |
| Singapore | \$34,592,961 | \$60,922,020 | \$43,237,253 | \$67,172,344 | 94.2% | 55.4% | 1.5% |
| Mexico | \$49,439,140 | \$53,153,972 | \$54,570,541 | \$62,898,369 | 27.2% | 15.3% | 1.4% |
| Turkey | \$15,153,714 | \$21,996,590 | \$38,736,089 | \$58,691,739 | 287.3% | 51.5% | 1.3% |
| Ireland | \$66,671,208 | \$54,714,304 | \$51,220,578 | \$57,780,152 | -13.3% | 12.8% | 1.3% |
| Malaysia | \$31,003,884 | \$35,896,139 | \$39,517,677 | \$50,780,958 | 63.8% | 28.5% | 1.1% |
| Austria | \$27,618,225 | \$34,316,475 | \$41,128,992 | \$47,777,313 | 73.0% | 16.2% | 1.0% |
| Sweden | \$38,558,304 | \$41,603,828 | \$44,178,384 | \$40,200,786 | 4.3% | -9.0% | 0.9% |
| Norway | \$20,614,140 | \$26,992,521 | \$30,939,602 | \$37,883,592 | 83.8% | 22.4% | 0.8% |
| Greece | \$27,012,060 | \$26,323,264 | \$40,411,372 | \$34,148,300 | 26.4% | -15.5% | 0.7% |
| Portugal | \$21,805,401 | \$28,241,776 | \$29,989,571 | \$29,419,581 | 34.9% | -1.9% | 0.6% |
| Poland | \$24,782,000 | \$22,276,000 | \$26,061,420 | \$28,215,341 | 13.9% | 8.3% | 0.6% |
| Denmark | \$12,308,920 | \$14,223,595 | \$21,554,498 | \$26,908,769 | 118.6% | 24.8% | 0.6% |
| South Africa | \$13,983,952 | \$18,901,152 | \$18,972,461 | \$25,248,787 | 80.6% | 33.1% | 0.6% |
| Thailand | \$9,597,021 | \$14,427,906 | \$20,607,030 | \$24,417,298 | 154.4% | 18.5% | 0.5% |
| TOTAL | \$2,920,935,693 | \$3,565,508,934 | \$4,000,198,149 | \$4,572,467,076 | 56.5% | 14.3% | 100.0% |

Source: United Nations COMTRADE

III. Market Potential Indicators

III .B. Top 30 World Importers, 2002–2005

3. HS 9021: Orthopedic Appliances; Splints Etc.; Artificial Parts Of The Body; Hearing Aids And Other Appliances To Compensate For A Defect Etc.; Parts Etc.

| Country | 2002 | 2003 | 2004 | 2005 | % Change | % Change | % Share |
|------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------|--------------|---------------|
| | | | | | 2002-05 | 2004-05 | 2005 |
| USA | \$2,762,133,156 | \$3,884,069,541 | \$4,185,379,321 | \$4,106,275,885 | 48.7% | -1.9% | 17.6% |
| France | \$720,335,744 | \$1,123,175,168 | \$2,109,045,593 | \$2,638,417,041 | 266.3% | 25.1% | 11.3% |
| Netherlands | \$1,007,374,740 | \$1,526,790,755 | \$1,802,985,000 | \$2,037,367,862 | 102.2% | 13.0% | 8.7% |
| Germany | \$1,155,487,616 | \$1,400,533,000 | \$1,556,185,528 | \$1,927,982,000 | 66.9% | 23.9% | 8.3% |
| Japan | \$1,098,304,553 | \$1,314,872,070 | \$1,452,927,628 | \$1,523,559,392 | 38.7% | 4.9% | 6.5% |
| Italy | \$683,220,096 | \$912,250,841 | \$1,141,369,124 | \$1,282,797,556 | 87.8% | 12.4% | 5.5% |
| Ireland | \$761,489,792 | \$1,386,804,608 | \$1,423,614,770 | \$1,267,385,578 | 66.4% | -11.0% | 5.4% |
| U.K. | \$648,096,576 | \$861,547,030 | \$1,261,510,109 | \$1,261,059,929 | 94.6% | 0.0% | 5.4% |
| Switzerland | \$541,458,944 | \$608,925,888 | \$798,965,220 | \$897,005,767 | 65.7% | 12.3% | 3.8% |
| Belgium | \$421,500,762 | \$517,278,379 | \$651,868,674 | \$742,648,296 | 76.2% | 13.9% | 3.2% |
| Australia | \$313,457,728 | \$406,405,408 | \$538,159,689 | \$651,681,481 | 107.9% | 21.1% | 2.8% |
| Canada | \$365,111,462 | \$413,722,702 | \$513,901,723 | \$623,347,047 | 70.7% | 21.3% | 2.7% |
| Spain | \$368,388,160 | \$468,968,520 | \$560,796,147 | \$621,120,195 | 68.6% | 10.8% | 2.7% |
| Sweden | \$269,108,768 | \$323,848,928 | \$399,137,381 | \$474,681,569 | 76.4% | 18.9% | 2.0% |
| China | \$165,077,304 | \$235,117,422 | \$334,822,247 | \$434,641,908 | 163.3% | 29.8% | 1.9% |
| Korea | \$200,935,744 | \$236,098,432 | \$272,929,905 | \$304,959,951 | 51.8% | 11.7% | 1.3% |
| Greece | \$115,519,280 | \$188,808,656 | \$251,577,817 | \$266,753,433 | 130.9% | 6.0% | 1.1% |
| Austria | \$156,937,879 | \$208,683,110 | \$230,187,078 | \$246,599,400 | 57.1% | 7.1% | 1.1% |
| Brazil | \$110,211,240 | \$132,915,678 | \$181,120,270 | \$233,535,752 | 111.9% | 28.9% | 1.0% |
| Singapore | \$52,866,841 | \$97,708,268 | \$148,175,416 | \$225,095,032 | 325.8% | 51.9% | 1.0% |
| Turkey | \$106,723,730 | \$109,311,127 | \$147,211,265 | \$207,060,952 | 94.0% | 40.7% | 0.9% |
| Denmark | \$148,163,136 | \$189,019,376 | \$183,416,411 | \$203,094,285 | 37.1% | 10.7% | 0.9% |
| Czech Rep. | \$95,083,791 | \$127,651,622 | \$145,019,878 | \$170,133,189 | 78.9% | 17.3% | 0.7% |
| China, Hong Kong | \$108,981,674 | \$125,420,370 | \$147,374,653 | \$164,546,495 | 51.0% | 11.7% | 0.7% |
| Mexico | \$98,206,688 | \$114,883,690 | \$133,942,071 | \$160,905,290 | 63.8% | 20.1% | 0.7% |
| Norway | \$99,072,768 | \$115,642,710 | \$141,253,773 | \$159,290,784 | 60.8% | 12.8% | 0.7% |
| Poland | \$70,201,000 | \$88,219,000 | \$108,561,094 | \$152,295,721 | 116.9% | 40.3% | 0.7% |
| South Africa | \$54,689,400 | \$72,351,128 | \$96,310,424 | \$128,924,380 | 135.7% | 33.9% | 0.6% |
| Portugal | \$61,615,098 | \$90,978,323 | \$111,260,669 | \$124,083,007 | 101.4% | 11.5% | 0.5% |
| Finland | \$63,111,424 | \$75,811,384 | \$88,056,367 | \$108,258,781 | 71.5% | 22.9% | 0.5% |
| TOTAL | \$12,822,865,094 | \$17,357,813,134 | \$21,117,065,245 | \$23,345,507,958 | 82.1% | 10.6% | 100.0% |

Source: United Nations COMTRADE

III. Market Potential Indicators

III .B. Top 30 World Importers, 2002–2005

4. HS 9022: X-Ray Etc. Apparatus, Including Radiography or Radiotherapy Apparatus, X-Ray Tubes & Generators, High Tension Generators Etc.; Parts & Accessories

| Country | 2002 | 2003 | 2004 | 2005 | % Change | % Change | % Share |
|------------------|------------------------|------------------------|-------------------------|-------------------------|--------------|--------------|---------------|
| | | | | | 2002-05 | 2004-05 | 2005 |
| USA | \$2,137,064,950 | \$2,337,375,541 | \$2,745,642,751 | \$3,161,673,192 | 47.9% | 15.2% | 26.8% |
| China | \$574,703,638 | \$757,534,673 | \$896,620,612 | \$1,080,113,941 | 87.9% | 20.5% | 9.2% |
| Japan | \$563,417,066 | \$579,229,708 | \$802,190,951 | \$862,666,008 | 53.1% | 7.5% | 7.3% |
| Netherlands | \$312,277,275 | \$504,660,451 | \$654,364,800 | \$812,154,239 | 160.1% | 24.1% | 6.9% |
| Germany | \$499,541,984 | \$602,309,000 | \$737,950,000 | \$796,678,000 | 59.5% | 8.0% | 6.8% |
| France | \$750,398,080 | \$804,659,904 | \$710,296,384 | \$768,542,483 | 2.4% | 8.2% | 6.5% |
| U.K. | \$326,398,080 | \$335,319,408 | \$390,341,921 | \$515,613,494 | 58.0% | 32.1% | 4.4% |
| Canada | \$251,675,967 | \$269,026,916 | \$277,170,129 | \$380,996,936 | 51.4% | 37.5% | 3.2% |
| Italy | \$317,602,272 | \$359,545,544 | \$395,526,226 | \$370,160,918 | 16.5% | -6.4% | 3.1% |
| Korea | \$183,167,872 | \$249,826,608 | \$293,456,467 | \$311,633,273 | 70.1% | 6.2% | 2.6% |
| Spain | \$166,666,848 | \$199,387,516 | \$228,146,884 | \$258,006,437 | 54.8% | 13.1% | 2.2% |
| Russia | \$160,935,988 | \$247,787,447 | \$253,396,640 | \$245,216,297 | 52.4% | -3.2% | 2.1% |
| Australia | \$142,718,400 | \$133,593,224 | \$168,734,834 | \$201,897,431 | 41.5% | 19.7% | 1.7% |
| Israel | \$107,463,000 | \$153,936,992 | \$181,689,000 | \$182,056,000 | 69.4% | 0.2% | 1.5% |
| India * | N/A | \$124,834,235 | \$132,929,191 | \$171,220,507 | 37.2% | 28.8% | 1.5% |
| Singapore | \$71,716,062 | \$111,680,429 | \$137,272,625 | \$163,129,750 | 127.5% | 18.8% | 1.4% |
| Belgium | \$87,319,819 | \$113,814,626 | \$117,096,621 | \$161,729,798 | 85.2% | 38.1% | 1.4% |
| Mexico | \$115,982,664 | \$174,957,435 | \$172,504,225 | \$153,619,164 | 32.5% | -10.9% | 1.3% |
| Turkey | \$49,994,245 | \$64,922,403 | \$105,484,043 | \$151,439,421 | 202.9% | 43.6% | 1.3% |
| Poland | \$52,185,000 | \$53,256,000 | \$68,044,017 | \$128,166,075 | 145.6% | 88.4% | 1.1% |
| Switzerland | \$84,652,392 | \$98,147,992 | \$113,933,905 | \$125,649,240 | 48.4% | 10.3% | 1.1% |
| Brazil | \$121,160,512 | \$89,438,147 | \$86,327,599 | \$119,279,224 | -1.6% | 38.2% | 1.0% |
| Austria | \$83,320,764 | \$110,846,144 | \$72,710,944 | \$102,619,185 | 23.2% | 41.1% | 0.9% |
| Saudi Arabia | \$46,382,982 | \$59,056,495 | \$70,220,065 | \$92,660,073 | 99.8% | 32.0% | 0.8% |
| Thailand | \$18,852,998 | \$27,015,813 | \$38,551,833 | \$89,278,301 | 373.5% | 131.6% | 0.8% |
| South Africa | \$51,846,212 | \$53,679,304 | \$61,690,633 | \$88,891,604 | 71.5% | 44.1% | 0.8% |
| Sweden | \$93,187,632 | \$90,875,344 | \$73,371,817 | \$85,259,417 | -8.5% | 16.2% | 0.7% |
| China, Hong Kong | \$65,707,635 | \$50,015,135 | \$59,362,986 | \$70,502,616 | 7.3% | 18.8% | 0.6% |
| Finland | \$49,174,304 | \$42,210,912 | \$48,993,090 | \$63,690,982 | 29.5% | 30.0% | 0.5% |
| Malaysia | \$41,816,770 | \$54,674,268 | \$44,565,863 | \$62,738,216 | 50.0% | 40.8% | 0.5% |
| TOTAL | \$7,527,331,411 | \$8,853,617,614 | \$10,138,587,056 | \$11,777,282,222 | 56.5% | 16.2% | 100.0% |

Source: United Nations COMTRADE

* % Change 2003-05, instead of % Change 2002-05

III. Market Potential Indicators

III .C Top 30 World Exporters & U.S. Market Share, 2002-2005

1. HS 9018: Instruments And Appliances Used In Medical, Surgical, Dental Or Veterinary Sciences (Including Electro-Medical And Sight-Testing); Parts Etc.

| Country | 2002 | 2003 | 2004 | 2005 | 2002-05 %Change | 2004-05 %Change | 2005 %Share |
|---------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------|--------------------|----------------|
| USA | \$10,052,880,891 | \$10,990,538,015 | \$12,309,447,065 | \$14,127,843,904 | 40.5% | 14.8% | 25.2% |
| Germany | \$4,636,081,664 | \$5,606,919,000 | \$6,857,693,000 | \$7,597,820,000 | 63.9% | 10.8% | 13.5% |
| Netherlands | \$2,572,124,675 | \$3,249,060,144 | \$3,866,349,660 | \$4,661,241,216 | 81.2% | 20.6% | 8.3% |
| Ireland | \$1,610,793,472 | \$3,160,904,960 | \$3,921,760,266 | \$4,241,514,326 | 163.3% | 8.2% | 7.6% |
| Japan | \$2,464,858,971 | \$2,762,346,507 | \$3,226,242,813 | \$3,375,841,362 | 37.0% | 4.6% | 6.0% |
| Mexico | \$1,753,538,688 | \$2,156,381,390 | \$2,440,528,492 | \$2,989,128,541 | 70.5% | 22.5% | 5.3% |
| U.K. | \$1,413,114,496 | \$1,751,986,523 | \$1,902,307,405 | \$2,231,475,600 | 57.9% | 17.3% | 4.0% |
| Belgium | \$1,232,005,449 | \$1,611,392,464 | \$1,949,476,363 | \$2,202,876,970 | 78.8% | 13.0% | 3.9% |
| France | \$1,450,589,568 | \$1,725,191,168 | \$1,949,209,030 | \$2,037,739,537 | 40.5% | 4.5% | 3.6% |
| Switzerland | \$914,552,832 | \$1,151,926,784 | \$1,337,240,791 | \$1,486,215,998 | 62.5% | 11.1% | 2.6% |
| Italy | \$967,333,248 | \$1,128,733,707 | \$1,275,437,030 | \$1,380,015,151 | 42.7% | 8.2% | 2.5% |
| China | \$407,929,379 | \$559,055,833 | \$818,532,782 | \$1,103,089,631 | 170.4% | 34.8% | 2.0% |
| Singapore | \$656,450,618 | \$817,283,841 | \$1,010,850,312 | \$1,069,613,272 | 62.9% | 5.8% | 1.9% |
| Denmark * | \$571,208,960 | \$692,176,512 | N/A | \$921,702,854 | 61.4% | 33.2% | 1.6% |
| Sweden | \$579,240,576 | \$684,463,424 | \$771,320,567 | \$743,428,111 | 28.3% | -3.6% | 1.3% |
| China, Hong Kong | \$544,617,515 | \$608,554,020 | \$699,012,449 | \$686,622,769 | 26.1% | -1.8% | 1.2% |
| Finland | \$364,949,344 | \$477,806,528 | \$525,723,332 | \$629,764,262 | 72.6% | 19.8% | 1.1% |
| Israel | \$354,105,984 | \$354,504,000 | \$457,854,000 | \$578,977,000 | 63.5% | 26.5% | 1.0% |
| Korea | \$291,673,024 | \$357,725,984 | \$472,161,968 | \$572,982,992 | 96.4% | 21.4% | 1.0% |
| Austria | \$336,913,921 | \$404,922,020 | \$516,464,458 | \$530,129,258 | 57.3% | 2.6% | 0.9% |
| Costa Rica* | N/A | \$466,681,024 | \$480,075,523 | \$501,447,808 | 7.4% | 4.5% | 0.9% |
| Canada | \$290,040,062 | \$366,897,292 | \$428,222,024 | \$466,172,375 | 60.7% | 8.9% | 0.8% |
| Spain | \$288,857,248 | \$351,372,259 | \$375,240,629 | \$430,417,293 | 49.0% | 14.7% | 0.8% |
| Malaysia | \$200,706,843 | \$231,498,115 | \$438,497,438 | \$362,266,835 | 80.5% | -17.4% | 0.6% |
| Thailand | \$195,169,288 | \$201,173,397 | \$239,742,150 | \$266,329,510 | 36.5% | 11.1% | 0.5% |
| Australia | \$181,011,024 | \$217,664,288 | \$248,102,528 | \$244,912,275 | 35.3% | -1.3% | 0.4% |
| Poland | \$64,794,000 | \$87,694,000 | \$132,963,508 | \$181,429,109 | 180.0% | 36.5% | 0.3% |
| Pakistan * | N/A | \$132,886,848 | \$157,980,040 | \$178,124,513 | 34.0% | 12.8% | 0.3% |
| India * | N/A | \$128,932,543 | \$151,420,326 | \$173,017,523 | 34.2% | 14.3% | 0.3% |
| Norway | \$146,827,344 | \$146,628,915 | \$161,287,528 | \$152,424,156 | 3.8% | -5.5% | 0.3% |
| TOTAL | \$34,542,369,084 | \$42,583,301,505 | \$49,121,143,477 | \$56,124,564,151 | 62.5% | 14.3% | 100.0% |

Source: United Nations COMTRADE

* 2003-05 %Change

III. Market Potential Indicators

III .C Top 30 World Exporters & U.S. Market Share, 2002-2005

2. HS 9019: Mechano-Therapy, Massage, Psychological Aptitude-Testing Appliances & Apparatus; Ozone Etc. Therapy And Respiration Apparatus; Parts & Accessories

| Reporter | 2002 | 2003 | 2004 | 2005 | 2002-05 %Change | 2004-05 %Change | 2005 %Share |
|------------------|------------------------|------------------------|------------------------|------------------------|-----------------|-----------------|---------------|
| USA | \$551,239,454 | \$643,089,597 | \$710,704,189 | \$814,841,033 | 47.8% | 14.7% | 17.8% |
| China | \$274,427,223 | \$337,956,192 | \$440,899,890 | \$679,666,529 | 147.7% | 54.2% | 14.9% |
| Germany | \$263,286,560 | \$313,025,000 | \$383,044,000 | \$433,953,000 | 64.8% | 13.3% | 9.5% |
| Australia | \$133,326,608 | \$141,851,040 | \$168,667,875 | \$307,724,250 | 130.8% | 82.4% | 6.7% |
| China, Hong Kong | \$311,981,685 | \$281,147,359 | \$255,052,840 | \$273,780,049 | -12.2% | 7.3% | 6.0% |
| U.K. | \$223,857,344 | \$188,956,409 | \$233,354,733 | \$231,867,850 | 3.6% | -0.6% | 5.1% |
| Canada | \$146,232,954 | \$172,871,175 | \$191,909,371 | \$206,647,934 | 41.3% | 7.7% | 4.5% |
| Mexico | \$87,825,896 | \$106,717,358 | \$88,924,543 | \$195,275,582 | 122.3% | 119.6% | 4.3% |
| France | \$92,518,808 | \$125,308,384 | \$151,766,618 | \$188,214,787 | 103.4% | 24.0% | 4.1% |
| Italy | \$119,106,440 | \$133,071,936 | \$168,577,718 | \$179,682,421 | 50.9% | 6.6% | 3.9% |
| Ireland | \$94,906,232 | \$155,047,776 | \$183,540,379 | \$168,912,594 | 78.0% | -8.0% | 3.7% |
| Japan | \$87,377,513 | \$111,611,287 | \$138,495,798 | \$146,703,965 | 67.9% | 5.9% | 3.2% |
| Netherlands | \$107,601,644 | \$103,079,884 | \$131,709,524 | \$126,871,505 | 17.9% | -3.7% | 2.8% |
| Belgium | \$35,260,824 | \$70,901,794 | \$87,292,968 | \$103,399,503 | 193.2% | 18.5% | 2.3% |
| Sweden | \$162,722,304 | \$157,896,320 | \$89,784,587 | \$83,947,196 | -48.4% | -6.5% | 1.8% |
| Switzerland | \$33,636,856 | \$59,504,532 | \$69,337,472 | \$81,808,945 | 143.2% | 18.0% | 1.8% |
| Korea | \$32,564,256 | \$39,261,820 | \$37,499,355 | \$60,274,219 | 85.1% | 60.7% | 1.3% |
| Spain | \$40,191,704 | \$46,924,672 | \$52,701,569 | \$56,185,094 | 39.8% | 6.6% | 1.2% |
| Singapore | \$13,251,900 | \$27,119,063 | \$28,080,675 | \$46,771,781 | 252.9% | 66.6% | 1.0% |
| Czech Rep. | \$13,996,226 | \$19,690,988 | \$34,799,722 | \$33,389,320 | 138.6% | -4.1% | 0.7% |
| New Zealand | \$18,522,562 | \$5,765,868 | \$10,265,205 | \$23,639,965 | 27.6% | 130.3% | 0.5% |
| Israel | \$18,345,000 | \$24,279,000 | \$39,549,000 | \$23,511,000 | 28.2% | -40.6% | 0.5% |
| Norway | \$14,875,541 | \$16,262,425 | \$32,816,003 | \$22,958,306 | 54.3% | -30.0% | 0.5% |
| Austria | \$17,248,511 | \$22,209,346 | \$20,090,271 | \$22,851,289 | 32.5% | 13.7% | 0.5% |
| Estonia | \$4,566,317 | \$5,081,183 | \$7,826,888 | \$14,320,348 | 213.6% | 83.0% | 0.3% |
| Poland | \$6,132,000 | \$6,782,000 | \$8,546,611 | \$10,395,898 | 69.5% | 21.6% | 0.2% |
| Slovakia | \$2,487,283 | \$2,885,597 | \$3,800,879 | \$10,176,392 | 309.1% | 167.7% | 0.2% |
| Denmark * | \$15,400,365 | \$12,090,181 | N/A | \$10,118,152 | -34.3% | -16.3% | 0.2% |
| Slovenia | \$5,835,243 | \$6,255,755 | \$7,641,967 | \$8,610,472 | 47.6% | 12.7% | 0.2% |
| Argentina | \$1,326,256 | \$2,213,087 | \$4,383,851 | \$8,109,829 | 511.5% | 85.0% | 0.2% |
| TOTAL | \$2,930,051,509 | \$3,338,857,028 | \$3,781,064,501 | \$4,574,609,208 | 56.1% | 21.0% | 100.0% |

Source: United Nations COMTRADE

* 2003-05 %Change

III. Market Potential Indicators

III .C Top 30 World Exporters & U.S. Market Share, 2002-2005

3. HS 9021: Orthopedic Appliances; Splints Etc.; Artificial Parts Of The Body; Hearing Aids And Other Appliances To Compensate For A Defect Etc.; Parts Etc.

| Country | 2002 | 2003 | 2004 | 2005 | 2002-05 %Change | 2004-05 %Change | 2005 %Share |
|------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------|--------------------|----------------|
| USA | \$3,203,940,538 | \$4,095,843,678 | \$4,531,245,854 | \$5,062,484,059 | 58.01% | 11.7% | 21.4% |
| Switzerland | \$2,035,961,856 | \$2,866,233,600 | \$2,993,523,011 | \$3,662,395,483 | 79.89% | 22.3% | 15.5% |
| Ireland | \$1,410,444,928 | \$2,098,895,616 | \$2,591,487,366 | \$2,729,169,682 | 93.50% | 5.3% | 11.5% |
| France | \$635,095,488 | \$964,245,696 | \$1,887,767,248 | \$2,440,207,870 | 284.23% | 29.3% | 10.3% |
| Netherlands | \$957,181,585 | \$1,570,958,363 | \$1,994,965,414 | \$1,971,754,110 | 106.00% | -1.2% | 8.3% |
| Germany | \$873,107,136 | \$1,115,229,000 | \$1,557,003,000 | \$1,776,886,000 | 103.51% | 14.1% | 7.5% |
| U.K. | \$580,482,496 | \$698,225,113 | \$1,234,937,099 | \$1,579,310,076 | 172.07% | 27.9% | 6.7% |
| Belgium | \$328,347,170 | \$495,645,144 | \$681,884,467 | \$798,422,842 | 143.16% | 17.1% | 3.4% |
| Denmark * | \$415,701,440 | \$492,370,080 | N/A | \$595,207,686 | 43.18% | 20.9% | 2.5% |
| Sweden | \$354,871,840 | \$414,208,736 | \$486,154,658 | \$489,378,632 | 37.90% | 0.7% | 2.1% |
| Singapore | \$133,322,242 | \$319,966,890 | \$469,309,127 | \$472,160,031 | 254.15% | 0.6% | 2.0% |
| Italy | \$136,622,032 | \$228,723,772 | \$293,840,122 | \$377,812,330 | 176.54% | 28.6% | 1.6% |
| China | \$92,776,491 | \$134,667,609 | \$181,900,052 | \$237,330,253 | 155.81% | 30.5% | 1.0% |
| Mexico | \$100,379,064 | \$150,776,310 | \$180,316,102 | \$225,378,579 | 124.53% | 25.0% | 1.0% |
| Australia | \$92,988,328 | \$148,305,616 | \$181,435,075 | \$221,267,356 | 137.95% | 22.0% | 0.9% |
| China, Hong Kong | \$104,719,210 | \$140,133,658 | \$162,867,270 | \$181,278,112 | 73.11% | 11.3% | 0.8% |
| Austria | \$52,260,438 | \$115,752,298 | \$162,712,690 | \$169,940,325 | 225.18% | 4.4% | 0.7% |
| Canada | \$48,101,455 | \$75,556,878 | \$109,722,246 | \$128,315,667 | 166.76% | 16.9% | 0.5% |
| Spain | \$94,582,824 | \$100,524,063 | \$105,666,834 | \$111,877,340 | 18.29% | 5.9% | 0.5% |
| Poland | \$24,426,000 | \$42,347,000 | \$51,913,597 | \$68,549,236 | 180.64% | 32.0% | 0.3% |
| Brazil | \$30,867,264 | \$33,182,031 | \$45,429,210 | \$57,029,018 | 84.76% | 25.5% | 0.2% |
| Iceland | \$23,741,896 | \$31,083,260 | \$45,800,426 | \$56,459,486 | 137.81% | 23.3% | 0.2% |
| Japan | \$36,293,746 | \$47,827,797 | \$63,709,647 | \$50,848,755 | 40.10% | -20.2% | 0.2% |
| Costa Rica* | N/A | \$35,999,032 | \$32,333,194 | \$38,717,364 | 7.55% | 19.7% | 0.2% |
| Korea | \$9,742,496 | \$24,939,044 | \$28,245,440 | \$28,236,285 | 189.83% | 0.0% | 0.1% |
| Cyprus | \$537,856 | \$1,011,541 | \$13,842,962 | \$25,775,945 | 4692.35% | 86.2% | 0.1% |
| Czech Rep. | \$13,315,713 | \$17,563,880 | \$24,385,257 | \$25,279,913 | 89.85% | 3.7% | 0.1% |
| Turkey | \$6,820,153 | \$10,870,225 | \$14,726,497 | \$22,637,448 | 231.92% | 53.7% | 0.1% |
| Finland | \$9,793,608 | \$15,471,785 | \$17,789,419 | \$19,061,643 | 94.63% | 7.2% | 0.1% |
| Slovenia | \$3,634,167 | \$3,220,811 | \$10,003,164 | \$16,332,619 | 349.42% | 63.3% | 0.1% |
| TOTAL | \$11,810,059,460 | \$16,489,778,526 | \$20,154,916,448 | \$23,639,504,145 | 100.16% | 17.3% | 100.0% |

Source: United Nations COMTRADE

* 2003-05 %Change

III. Market Potential Indicators

III .C Top 30 World Exporters & U.S. Market Share, 2002-2005

4. HS 9022: X-Ray Etc. Apparatus, Including Radiography or Radiotherapy Apparatus, X-Ray Tubes & Generators, High Tension Generators Etc.; Parts & Accessories

| Reporter | 2002 | 2003 | 2004 | 2005 | 2002-05 %Change | 2004-05 %Change | 2005 %Share |
|------------------|------------------------|-------------------------|-------------------------|-------------------------|--------------------|--------------------|----------------|
| Germany | \$1,960,558,976 | \$2,522,767,000 | \$3,030,769,000 | \$3,335,163,000 | 70.1% | 10.0% | 24.9% |
| USA | \$2,002,614,393 | \$2,220,903,920 | \$2,408,847,008 | \$2,868,521,114 | 43.2% | 19.1% | 21.4% |
| Netherlands | \$290,184,691 | \$948,436,592 | \$1,212,956,922 | \$1,386,972,908 | 378.0% | 14.3% | 10.3% |
| Japan | \$755,583,234 | \$855,217,376 | \$1,041,163,126 | \$1,282,609,258 | 69.8% | 23.2% | 9.6% |
| France | \$887,981,248 | \$1,049,438,976 | \$1,012,509,147 | \$1,160,399,836 | 30.7% | 14.6% | 8.7% |
| U.K | \$297,976,000 | \$415,436,314 | \$512,111,630 | \$547,241,847 | 83.7% | 6.9% | 4.1% |
| China | \$189,173,448 | \$220,913,734 | \$304,257,972 | \$377,003,665 | 99.3% | 23.9% | 2.8% |
| Israel | \$259,172,000 | \$274,028,000 | \$550,624,000 | \$350,178,000 | 35.1% | -36.4% | 2.6% |
| Italy | \$161,674,912 | \$198,230,206 | \$271,095,531 | \$279,836,293 | 73.1% | 3.2% | 2.1% |
| Mexico | \$159,459,088 | \$164,243,492 | \$211,070,681 | \$234,021,059 | 46.8% | 10.9% | 1.7% |
| India* | N/A | \$154,250,605 | \$164,783,154 | \$213,298,818 | 38.3% | 29.4% | 1.6% |
| Switzerland | \$138,968,272 | \$169,580,400 | \$189,364,136 | \$206,147,334 | 48.3% | 8.9% | 1.5% |
| Finland | \$149,103,376 | \$175,592,832 | \$174,369,609 | \$195,296,670 | 31.0% | 12.0% | 1.5% |
| Belgium | \$72,373,323 | \$117,210,651 | \$114,296,393 | \$154,423,966 | 113.4% | 35.1% | 1.2% |
| Canada | \$51,620,990 | \$73,351,006 | \$96,545,669 | \$122,541,562 | 137.4% | 26.9% | 0.9% |
| Spain | \$75,424,272 | \$105,981,944 | \$117,014,663 | \$116,462,635 | 54.4% | -0.5% | 0.9% |
| Sweden | \$181,765,200 | \$135,599,760 | \$139,007,874 | \$83,654,194 | -54.0% | -39.8% | 0.6% |
| Singapore | \$39,956,089 | \$49,881,513 | \$67,685,114 | \$82,773,769 | 107.2% | 22.3% | 0.6% |
| Austria | \$35,297,953 | \$44,375,854 | \$46,136,931 | \$63,849,224 | 80.9% | 38.4% | 0.5% |
| Korea | \$22,894,514 | \$36,655,700 | \$44,935,087 | \$63,639,198 | 178.0% | 41.6% | 0.5% |
| China, Hong Kong | \$35,909,259 | \$34,160,153 | \$38,865,162 | \$51,824,951 | 44.3% | 33.3% | 0.4% |
| Ireland | \$52,672,124 | \$129,165,704 | \$44,741,680 | \$47,583,679 | -9.7% | 6.4% | 0.4% |
| Malaysia | \$26,841,409 | \$28,364,997 | \$59,213,678 | \$41,396,654 | 54.2% | -30.1% | 0.3% |
| Denmark * | \$28,364,200 | \$21,573,812 | N/A | \$31,854,016 | 12.3% | 47.7% | 0.2% |
| Argentina | \$1,484,342 | \$2,002,717 | \$1,996,944 | \$26,627,532 | 1693.9% | 1233.4% | 0.2% |
| Australia | \$19,982,456 | \$21,927,340 | \$20,829,977 | \$22,505,908 | 12.6% | 8.0% | 0.2% |
| Russia | \$9,309,921 | \$7,681,165 | \$18,554,462 | \$20,210,429 | 117.1% | 8.9% | 0.2% |
| Czech Rep. | \$7,409,296 | \$10,179,697 | \$13,755,731 | \$19,421,827 | 162.1% | 41.2% | 0.1% |
| South Africa | \$6,299,174 | \$6,270,618 | \$9,186,787 | \$10,342,144 | 64.2% | 12.6% | 0.1% |
| Norway | \$8,214,365 | \$10,553,024 | \$5,325,242 | \$9,858,014 | 20.0% | 85.1% | 0.1% |
| TOTAL | \$7,928,268,525 | \$10,203,975,102 | \$11,922,013,310 | \$13,405,659,504 | 69.1% | 12.4% | 100.0% |

Source: United Nations COMTRADE

* 2003-05 %Change

III. Market Potential Indicators

III .D. Market Sizes & U.S. Share, by Country

The Table below provides comparative data on total market, import market, and imports from the U.S. for 52 countries considered “best prospects” for U.S. exports of Medical Equipment & Supplies. The countries are listed in alphabetic order, not in rank order. The data are based on local sources and reflect best estimates of USCS commercial officers each country. Statistical accuracy and comparability to other sources (e.g., “USDOC Bureau of Census”) are affected by a number of factors, including lack of published figures in certain markets, variances in data collection techniques, sources of data, and industry definitions.

U.S. Medical Equipment & Supplies

(Values in \$ Millions)

| Country | Total Market | | | Total Import | | | Import from the US | | | U.S. Share 2006% |
|----------------|--------------|--------|------|--------------|--------|------|--------------------|-------|------|---------------------|
| | 2004 | 2006 | % | 2004 | 2006 | % | 2004 | 2006 | % | |
| Argentina | 303 | 479 | 58% | 225 | 385 | 71% | 71 | 127 | 79% | 33% |
| Australia | 2,759 | 3,667 | 33% | 1,766 | 1,970 | 12% | 728 | 956 | 31% | 49% |
| Austria | 468 | 501 | 7% | 990 | 1,071 | 8% | 199 | 219 | 10% | 20% |
| Brazil* | 1,602 | 1,840 | 15% | 851 | 930 | 9% | 361 | 360 | 0% | 39% |
| Bulgaria* | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Canada | 3,427 | 4,259 | 24% | 2,263 | 2,906 | 28% | 1,318 | 1,632 | 24% | 56% |
| Chile*** | 172.2 | 226.2 | 31% | 156.7 | 209.5 | 34% | 56.5 | 68.2 | 21% | 33% |
| China | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Costa Rica* | 73 | 38 | -48% | 74.3 | 40 | -46% | 33.3 | 20 | -40% | 50% |
| Czech Republic | 2,343 | 2,599 | 11% | 1,543 | 1,723 | 12% | 216 | 260 | 20% | 15% |
| Denmark | 1,080 | 1,200 | 11% | 950 | 950 | 0% | 280 | 285 | 2% | 30% |
| El Salvador* | 29.5 | 29.1 | -1% | 30.07 | 29.93 | 0% | 18.29 | 20.14 | 10% | 67% |
| Finland | 634 | 795 | 25% | 428 | 585 | 37% | 110 | 154 | 40% | 26% |
| France | 5,047 | 5,485 | 9% | 2,850 | 3,088 | 8% | 822 | 926 | 13% | 30% |
| Germany* | 14,000 | 14,970 | 7% | 14,200 | 14,760 | 4% | 4,260 | 4,550 | 7% | 31% |
| Greece* | 705 | 810 | 15% | 700 | 804 | 15% | 100 | 135 | 35% | 17% |
| Guatemala* | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Haiti | 38 | 45 | 18% | 24 | 31 | 29% | 6 | 16 | 167% | 52% |
| India* | 1,845 | 2,085 | 13% | 1,140 | 1320 | 16% | 190 | 237 | 25% | 18% |
| Ireland | 352 | 421 | 20% | 659 | 794 | 20% | 393 | 474 | 21% | 60% |
| Israel | 230 | 280 | 22% | 210 | 250 | 19% | 73 | 73 | 0% | 29% |
| Italy | 3,963 | 4,583 | 16% | 2,687 | 4,400 | 64% | 1,190 | 1,133 | -5% | 26% |
| Japan | 19,069 | 18,218 | -4% | 8,845 | 8,595 | -3% | 5,140 | 4,890 | -5% | 57% |
| Jordan | 93 | 98 | 5% | 84 | 95 | 13% | 14.9 | 17.3 | 16% | 18% |
| Kazakhstan | 142.3 | 309 | 117% | 135.9 | 300 | 121% | 15.1 | 22 | 46% | 7% |

| Country | Total Market | | | Total Import | | | Import from the US | | | U.S. Share |
|---------------------|--------------|-------|------|--------------|-------|------|--------------------|-------|------|------------|
| | 2004 | 2006 | % | 2004 | 2006 | % | 2004 | 2006 | % | 2006% |
| Malaysia | 803 | 1,129 | 41% | 379 | 478 | 26% | 73 | 124 | 70% | 26% |
| Morocco* | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Nepal | 12 | 15 | 25% | 7.95 | 13.16 | 66% | 2.96 | 0.862 | -71% | 7% |
| Netherlands | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| New Zealand | 420 | 555 | 32% | 420 | 520 | 24% | 210 | 280 | 33% | 54% |
| Nigeria* | 850 | 1,123 | 32% | 610 | 1011 | 66% | 40 | 10.1 | -75% | 1% |
| Norway | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Philippines | 69 | 88 | 28% | 90 | 125 | 39% | 24 | 42 | 75% | 34% |
| Portugal | 582 | 714 | 23% | 503 | 628 | 25% | 51 | 62 | 22% | 10% |
| Qatar* | 58.8 | 55.62 | -5% | 58.8 | 55.62 | -5% | 25.4 | 19.07 | -25% | 34% |
| Russia* | 1,400 | 1,800 | 29% | 1,000 | 1400 | 40% | 220 | 336 | 53% | 24% |
| Saudi Arabia | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Serbia & Montenegro | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Slovakia | 1,292 | 8,650 | 570% | 973 | 2,000 | 106% | 11.6 | 15 | 29% | 1% |
| Slovenia | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| South Africa | 183.2 | 211.3 | 15% | 218.79 | 229.4 | 5% | 58.4 | 63 | 8% | 27% |
| South Korea* | 1,801.40 | 2,208 | 23% | 1,182 | 1443 | 22% | 406.8 | 491 | 21% | 34% |
| Spain | 2,703 | 3,569 | 32% | 2,369 | 3,202 | 35% | 830 | 1,146 | 38% | 36% |
| Sri Lanka | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Sweden | 2,167 | 2,673 | 23% | 1,189 | 1400 | 18% | 286 | 338 | 18% | 24% |
| Switzerland | 2,200 | 2,700 | 23% | 1,600 | 2,100 | 31% | 359 | 805 | 124% | 38% |
| Syria* | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Taiwan | 1,467 | 1,596 | 9% | 837 | 940 | 12% | 263 | 295 | 12% | 31% |
| Thailand | 396 | 687 | 73% | 329 | 637 | 94% | 137 | 219 | 60% | 34% |
| Turkey *** | 3,000 | 4,000 | 33% | 1,800 | 2,532 | 41% | 390 | 448 | 15% | 18% |
| UAE | 197 | 235 | 19% | 206 | 255 | 24% | 70 | 97 | 39% | 38% |
| Uruguay | N/A | N/A | N/A | 21.3 | 27 | 27% | 9 | 9.4 | 4% | 35% |

* 2003-2005 *** 2005-2006

IV. Best-Prospect Market Assessments

Following are overviews of “best prospect” markets for U.S Medical Equipment & Supplies, based on observations of United States Commercial Service (USCS) posts in each country. The countries appear in alphabetical order. For more detailed market research on Medical Equipment and Supplies in these and other specific markets, see relevant Market Research Reports listed in Chapter VI. For general commercial and economic information on individual countries, see the relevant Country Commercial Guides (CCGs).

ARGENTINA (2007)

Overview: Healthcare spending in Argentina has totaled nearly \$21 billion per year over the past several years, but this spending has not translated into fully successful results. Currently, total healthcare expenses amount to approximately \$7.5 billion (taking into account a threefold decrease in annual expenditures due to the change in exchange rate).

The sector was experiencing a profound crisis, which was further aggravated by the devaluation of the Argentine peso in January 2002. The high non-payment rate from Argentina’s national, municipal, and provincial governments resulted in part due to the default and from the fact that members were not paying their healthcare companies. This resulted in hospitals trimming or slowing down their procurement for basic supplies and medical equipment. Overall these factors have severely limited the supply of critical medical supplies and medicines in a sector that is heavily dependent on imported goods. About 70% of medical equipment and supplies and 50% of pharmaceuticals used in the treatment of chronic diseases are imported.

Best Products/Services: Best prospects for U.S. exports are: ultrasound

diagnostic equipment, implants, stents, cardiac valves, pacemakers, hearing aids, specialized disposables (catheters, cannulae, electrodes, hemodialysis filters), surgical instruments and intraocular lenses. Components and medical equipment parts represent a strong sales potential, in large part because the market conditions require the reconditioning of equipment already in use.

Opportunities: In a sector that is highly supplied by imports, the United States continues to lead the import market, and currently holds 30% of the market share. Total market size for medical supplies and equipment was approximately \$210 million in 2003. Imports accounted for approximately \$136 million in 2003, with the U.S. comprising \$41 million of this segment.

The Government declared a national Sanitary Emergency that has been in force in Argentina since 2002 and extended through December 31, 2004. The national government passed Law No. 25590 to exempt import and tax duties on imports of critical new medical products, such as certain medicines, reagents, supplies and parts of medical equipment that are not manufactured in Argentina, in order to lower import costs by approximately 30% and to increase access to imported goods.

Resources: For additional information on this industry such as trade events, useful links, and the products and services that the U.S. Commercial Service can provide to help you succeed in the Argentine market, visit http://www.comerciosa.org/argentina_Editable/-LPaz/Healthcare_Medical_Eq/Healthcare_Medical_Eq_Main.asp.

AUSTRALIA (2007)

Overview: Medical equipment is one of Australia's largest markets for U.S. exporters. More than 85% of devices and diagnostics used in Australia are imported. Approximately 60% of these products come from the U.S. Other major market suppliers are Germany, Japan and the EU.

Australia is a mature market for medical equipment, characterized by modest sales growth and strong competition. A large number of small companies and a small number of multinational firms serve the market. As the world's largest producer of medical equipment, most of the major U.S. medical companies are represented in Australia, either through local representatives or subsidiary companies. More than 1,100 companies are involved in the medical device and diagnostics industry in Australia. The market is valued at roughly \$2 billion, representing about 1% of the global market. The most recent OECD report ranked Australia 10th in terms of health spending as a proportion of gross domestic product in 2001.

Australia has a government-funded healthcare scheme with the Government being the primary purchaser of medical equipment. Public hospitals account for approximately 70% of sales of medical equipment, while 30% of sales are made

to the private sector. As the costs of maintaining a public healthcare system are increasing, public hospital administrators and medical staff are directed to choose the best product available at the lowest possible cost.

The medical equipment market in Australia is regulated by the Therapeutic Goods Administration (TGA). Australia's regulatory framework is harmonized with international accepted best practice, and is based on the guidelines of the Global Harmonization Task Force (GHTF) and the European Community (EC) requirements. If a product does not have a CE Mark, a Conformity Assessment of the manufacturing facility will have to be undertaken by the TGA.

Medical devices are classified according to the degree of risk associated with their application. As approval for sale in Australia can only be obtained by an Australian sponsor, U.S. exporters need to appoint an Australian representative before their products can be approved by the TGA.

Best Products/Services: Although a relatively small market, Australia's high per capita income means that there is demand for the full range of sophisticated medical equipment. In addition, Australia enjoys a high standard of medical practice. This, together with the expectation of state-of-the-art medical treatment by an educated population, ensures a continuing need for high quality and innovative medical equipment and products.

Government policy and activity in the provision of public health services is a major factor in the demand for medical

equipment. Nonetheless, the provision of health services by the private sector is increasing. Further increases are likely due to the rise in the number of Australians with private health insurance and the expanding role of the private sector in the care of Australia's aging population. The public demand for improved healthcare services will continue to increase.

U.S. medical equipment is traditionally well received in Australia due to its perceived high quality. Opportunities exist for state-of-the-art and innovative medical equipment and products that can result in a significant improvement in clinical outcomes. In particular, products that serve Australia's aging population are likely to experience growth.

Under the Free Trade Agreement between the U.S. and Australia (AUSFTA), medical equipment will continue to receive duty-free treatment. In addition, U.S. firms will be allowed to compete for Australia's government purchases on a nondiscriminatory basis.

Resources:

-Australian Therapeutic Goods Administration: <http://www.tga.gov.au/>
-Australian Department of Health and Ageing: <http://www.health.gov.au/>

U.S. companies seeking information on the Australian healthcare industry are encouraged to contact Monique Roos at the U.S. Commercial Service in Sydney (email: monique.roos@mail.doc.gov).

AUSTRIA (2007)

Overview: U.S. manufacturers with state-of-the-art medical equipment have good opportunities in the Austrian

market. They have maintained a respectable portion of the health care equipment market in recent years.

The U.S. is the second largest supplier, after Germany. Its share of the import market for medical equipment into Austria was 20.2% in 2005. U.S.-engineered medical equipment sales are actually much larger than the official import statistics would indicate. This is because many products imported into Austria from Western European and Far Eastern countries are assembled by subsidiaries of U.S. firms based in those countries.

Austria is a transit-trade country with very successful connections to Central and Eastern European and Middle Eastern countries. The recorded level of total imports is actually greater than the total market, because of these factors. Given recent budget cuts in the Austrian health care system, an estimated annual real growth rate of two to 3% of total market size over the next three years seems realistic.

As of January 1, 2005, Austria had approximately 38,400 active physicians. Of the total, 20,400 were employed by private or public hospitals or walk-in clinics, and 18,000 had independent private practices, of which 11,800 were medical specialists. Austrian doctors have their own representative body in the form of the "Oesterreichische Aerztekammer" (Austrian Chamber of Medical Doctors), which is divided into nine provincial chambers. Membership is compulsory. The Chamber submits opinions on bills of law that affect doctors, represents doctors in negotiations (e.g. with the social health

insurance boards), and administers the doctors' own pension fund.

As of January 1, 2004, Austria had 272 public and private hospitals with an average of 68,000 beds, of which approximately 900 were for intensive care. A total of 100 hospital departments are equipped with intensive care units. Austria has 8.4 beds per 1,000 inhabitants – about the average for Western Europe. It is anticipated that some additional public hospitals will be forced to shut down in the future, in order to reduce the extremely high costs of the Austrian healthcare system.

The Austrian Hospitals Act specifies two main types of hospital: general hospitals, and specialized hospitals providing medical care for acute cases, victims of accidents, or patients in certain age groups. This latter category includes pediatric hospitals and the hospital departments in nursing homes. General hospitals comprise 42% of the total. The remaining 58% include specialized hospitals (30%), sanatoriums (11%), nursing institutions (9%), and convalescent and maternity homes (8%).

Best Products/Services: The best opportunities for new sales are for state-of-the-art equipment such as:

- Diagnostic imaging equipment, especially ultrasonic diagnostic equipment
- Patient monitoring systems including intensive care units
- Endoscopic instruments and equipment
- Dialysis equipment
- Pacemakers
- Implantable devices
- Highly sophisticated clinical laboratory equipment
- Nuclear medical instruments

- Clinical laboratory equipment
- Sophisticated surgical disposables

Opportunities: All major hospital projects planned for Vienna and the Austrian provinces have been completed. With the expansion of the city of Vienna across the Danube river, a new tender was recently published for a hospital project called “Krankenhaus Nord”, for a total cost of \$562 million. The hospital is expected to have 850 beds and should be completed by 2012.

In some hospitals, replacement of obsolete equipment is an ongoing process. An increasing number of hospital projects in the Central and Eastern European countries of Hungary, Czech Republic, Slovakia, Romania, and Bulgaria are to be constructed by Austrian companies. These projects will result in many opportunities for American companies to penetrate these markets as suppliers or subcontractors, or in partnership with Austrian firms active in the region.

Furthermore, some Austrian design and construction companies are involved in hospital projects in Middle Eastern and Asian countries, including Saudi Arabia, Kuwait, and Indonesia.

U.S.-manufactured medical products enjoy an excellent reputation in Austria for their state-of-the-art technology. Only high-quality products will find good opportunities in the Austrian market. Quality, reliability, service, and timely delivery are crucial factors for selling in this market. Availability of technical assistance and service support are essential if U.S. companies expect to succeed.

Resources:

- Bundesministerium fuer Gesundheit, Familien und Jugend (Federal Ministry for Health, Families and Youth): www.bmgf.gv.at
- Hauptverband der oesterreichischen Sozialversicherungstraeger (Association of Austrian Sick Funds): www.sozialversicherung.at
- Oesterreichisches Bundesinstitut fuer Gesundheitswesen (Federal Institute for Health): www.oebig.at
- Fonds "Gesundes Oesterreich" (Foundation "Healthy Austria"): www.fgoe.org
- Wirtschaftskammer Oesterreich (Austrian Federal Economic Chamber): www.wko.at
- Oesterreichische Aerztekammer (Physicians Chamber): www.aek.or.at
- Austrian Medical Society: www.ameso.at
- Oesterreichische Gesellschaft fuer Allgemein- und Familienmedizin (Member of World Organization of Family Doctors): www.oegam.at
- TUEV Oesterreich (test & certification institution): www.tuev.at/medizin
- Oesterreichisches Medizinprodukte Handbuch – Goeschl Publishing House (Medical Products Handbook): www.medizinprodukte.at

Contact:

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BRAZIL (2006)

Overview: Brazil has a large and diversified economy that offers US companies many opportunities to export their goods and services. As Brazil's largest single trading partner, the US enjoys a strong reputation in a variety of sectors. The medical equipment market offers US companies an excellent opportunity to do business in Brazil.

Opportunities: Brazil is the largest medical equipment market in South America. The total market for medical equipment in Brazil should continue to expand through 2006. Brazil is both a major medical equipment producer and importer. This industry comprises a number of related products and services including:

- Medical equipment and devices.
- Dental equipment and products.
- Radiological and diagnostic imaging equipment.
- Laboratory equipment.

Brazilian medical equipment revenues in 2004 reached an estimated \$1.8 billion, which represents an increase of 72% since 1999. The U.S. Commercial Service estimates the market to reach over \$2 billion in 2006. The U.S. accounts for approximately 50% of the import market. US sales have traditionally been made through Brazilian agents, distributors and importers who sell to hospitals and clinics.

There are few high-quality Brazilian manufacturers of advanced medical products, so Brazil's reliance on imports

should continue for some time. Local buyers view US and other foreign products (mainly Canadian and European) as having comparable quality and reliability. Thus, financing terms often become the differentiating criteria in making a sale. There are a number of financing tools available to help US exporters structure a more competitive financing structure.

There are some 3,000 equipment and supply distributors in Brazil, but only 3.3% of these firms can be considered large companies. Excluding the direct sales networks of individual multinational manufacturers such as GE, virtually all distributors are regional rather than national.

In addition to the attractive size of the Brazilian medical market, US exporters should consider the opportunities offered by Mercosul, and use Brazil as a “spring board” for export into Argentina, Uruguay and Paraguay. Since compulsory product registration before sale is required for all of Mercosul, including Brazil, US exporters should consult a local lawyer/consultant before signing a contract with any agent/distributor.

An interesting trend in Brazil is the growing market for home health care products that has increased dramatically in recent years. Brazil has approximately 150 home health care companies compared to approximately 1,440 in the US. In Brazil, these companies are increasingly becoming viewed as good ways to cut hospitalization costs while offering better services to patients. Nowadays, health insurance companies are responsible for paying 99% of the costs of home care treatment.

Accordingly, we see the market for home health care products growing dramatically for many years to come. Brazil’s Regional Nursing Council is currently developing procedures on how to regulate this market, including standards for health professionals.

Private entities such as universities and even religious organizations represent new opportunities for both US equipment and training/management service suppliers. Interested US suppliers should look for opportunities beyond the larger communities of São Paulo, Rio de Janeiro and Minas Gerais. Excellent opportunities exist in the northeastern states of Bahia, Ceará, Pernambuco, Paraíba and Rio Grande do Norte and the southern states of Paraná, Santa Catarina and Rio Grande do Sul.

In the past, a weak currency has slowed government investment plans for public hospitals. A stronger currency, though, has meant that private and public hospitals have greater purchasing power, and with continued expansion of Brazil’s private health care sector, the market should grow. New opportunities for US exporters abound, particularly for:

- More advanced medical equipment.
- Disposables.
- Diagnostic devices.
- Implants and components.

Resources: For more information please contact Industry Specialist Jefferson Oliveira at:

jefferson.oliveira@mail.doc.gov

For more market research:

www.export.gov/marketresearch.html

Brazilian Ministry of Health:

www.saude.gov.br

ABIMO - Brazilian Association of Dental, Medical and Hospital Equipment: www.abimo.org.br

SINAEMO - Syndicate of Medical, Dental, Hospital and Laboratory Industries: www.abimo.org.br

ABIMED – Brazilian Association of Equipment, Products and medical Supplies Importers: www.abimed.org.br

With offices in Brasilia, São Paulo, Rio de Janeiro, Belo Horizonte & Porto Alegre, the US Commercial Service Brazil (www.buyusa.gov/brazil) helps US exporters enter Brazil's market through research, matchmaking and advocacy. To the best of our knowledge the information in this report is accurate, however readers should conduct their own due diligence before entering into business ventures.

BULGARIA (2006)

Overview: Public expenditures for healthcare have grown from 3.8% of GDP in 2002 to 4% in 2003, 4.3% in 2004 and 4.4 for 2005. In actual figures, this amounts to \$591.4 million in 2002, \$775.6 million in 2003, \$835.3 million in 2004 and 1,232.0 million in 2005. Estimates for 2006 are 4.4% of the national budget to be allocated for healthcare instead of the requested 4.9%. The budget cut is due to the IMF requested restrictions.

The healthcare budget is allocated as follows:

- National Health Insurance Fund – 61.5%
- Ministry of Health – 29.0%
- Municipality Healthcare budgets – 5.1%

- Other Ministries and State Institutions: 3.1%
- Miscellaneous sources such as private companies: 1.3%

In 2004 and 2005 the municipal hospitals have been financed entirely by the National Health Insurance Fund (NHIF). This means that they have been required to work within the scope of the so-called clinical paths (a system close to the Disease Related Groups– DRG).

These clinical paths are standard operating procedures for diagnosing and treating of specific diseases. The clinical paths are organized by categories of diseases and provide a number of diagnoses for each disease. For example, the category for infectious diseases includes 109 diagnoses. In total, there are 240 clinical paths in all major diseases covering over 5,000 diagnoses. The entire hospital care for 2006 is estimated to be financed entirely by the NHIF under 350 clinical paths. This will result in a bigger NHIF deficit within its budget amounting to \$946 million. The Ministry of Health will cease to provide any healthcare funding with the exception of certain specific national grant programs.

Those municipalities that are judged not to merit a hospital by the NHIF will be forced to close their hospitals and replace them with smaller medical centers. These medical centers will only provide emergency care and will be limited to 10 beds. In addition to the municipal hospitals, Bulgaria has regional hospitals, National Healthcare Centers and University hospitals.

Over the past several years, the system of health care has been reshaped by the

introduction of general practitioner (GP) primary care providers, as well as by the introduction of new privately run groups of practices. These practices were created through the transformation of the traditional government or municipal outpatient clinics and through the process of gradual conversion of fully sponsored inpatient hospitals into organizations managed on the basis of health insurance.

The newly shaped healthcare system providers are aiming at restructuring and upgrading of their equipment and hardware base.

Since 2001 the National Health Insurance Fund has been operating as the main agent of financing primary care. Healthcare contributions are now the main source of funding health activities, with diminishing government subsidies and rising patient co-payments.

Best Products/Services:

- Support for outpatient and inpatient care
- Invasive and noninvasive surgery
- Ultrasound equipment
- In-vitro diagnostic equipment
- Urology equipment
- Laboratory and testing equipment
- Diagnostic imaging equipment
- Tissue and blood bank related equipment
- Hospital care equipment and hospital information systems.

Opportunities: Medium and long-term procurements will be made for information systems developed for the National Health Insurance Fund, as well as training, public information and technical assistance, and support for outpatient and inpatient care. Hospitals perform regular procurements of diagnostic equipment, modern patient

monitoring systems and hospital management systems.

Resources:

-Ministry of Healthcare:
www.mh.government.bg

-Bulgarian Drug Agency: www.bda.bg

-World Bank: www.worldbank.bg

-National Health Insurance Fund (NHIF): www.nhif.bg

-European Bank for Reconstruction and Development: www.ebrd.bg

-Bulgarreklama (agency organizing the international exhibition Bulmedica, Buldental, Buloptics, Bullabor):
www.bulgarreklama.com

For more information and market entry strategies contact:

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CANADA (2007)

Overview: Demand in the category of diagnostic equipment is expected to lead the growth in sales of modern and cost-efficient medical equipment over the next three years in Canada. The average real growth during that period should be between 10 and 15%. The bulk of new demand for diagnostic equipment is for imaging technologies, including MRI (magnetic resonance imaging) and CT (computed tomography). Medical equipment purchased by Canadian public health institutions accounts for

over 70% of the total medical equipment and supplies market. Demand from private sector clinics, particularly for diagnostic equipment should be on the rise.

The use of medical devices is strictly regulated in Canada. Health Canada's Therapeutic Products Program (TPP) ensures the safety and effectiveness of medical devices, which are classified into four categories depending on the level of potential risk to the patient. Class I represents devices that pose the least risk while Class IV pose the highest risk.

US firms maintain a dominant position as suppliers to the Canadian market, which is reflected by the following recent statistics concerning device licenses issued by Health Canada: 68% go to US companies, 9% to Canadian companies, 8% to German companies, 3% to Britain, 2% to France and 10% to all other countries combined.

Best Products/Services:

- HS 901813 – Magnetic Resonance Imaging Apparatus
- HS 902212 – X-Ray Equipment Computed Tomography.

Opportunities: U.S. Medical Technologies companies wanting to develop new sales in Canada, benefit from access to numerous business facilitation programs offered by U.S. Commercial Service year-round.

Resources: <http://www.hc-sc.gc.ca>
Through its administration of the Canada Health Act, Health Canada is the agency committed to maintaining the country's public health insurance system which is universally available to permanent

residents, comprehensive in the services it covers, accessible without income barriers, portable within and outside the country and publicly administered. Each province and territory administers its own health care plan.

For more information, please contact industry sector coordinator, Pierre Richer, at 514 908-3661 or Pierre.richer@mail.doc.gov

CHILE (2007)

Overview: Chile currently spends approximately 7% of its GDP on healthcare. Chile's medical sector is small but extremely competitive. Chile produces and exports a limited amount of medical products exporting approximately \$5.3 million worth of medical equipment, disposables, and instruments in 2006. Given its limited production, Chile relies upon imports to supply its growing healthcare market. Yearly increases in government spending since 1990 have raised the Chilean public healthcare budget to a record \$4.1 billion for 2007, representing a 13% increase over 2006 budget.

According to the Chilean Health Superintendence, public health insurance (Fonasa) and private health insurance companies (ISAPRES) cover \$2 billion and \$1.8 billion, respectively, of medical expenses per year.

In July 2005, the Chilean government implemented a healthcare reform package aimed at reducing the inequities of the Chilean healthcare system. Chile's "Universal Access with Explicit Guarantees" or "Plan AUGE" ensures government-funded healthcare coverage

for individuals regardless of age, class, and most importantly, their ability to pay.

By July 2007, “Plan AUGE” will expand to include all 56 major illnesses and by 2009 there will be 80 diseases listed by the Ministry of Health. These illnesses range from cancer to respiratory disease to mental illness.

The Chilean Ministry of Health is also undergoing major improvements of most of its public hospital infrastructure and their improvement will require an investment of over \$600 million in equipment and infrastructure for the next several years. Investment includes the construction of new hospitals and new medical attention units. The government will finance new or refurbished hospitals, two of which will be opened to concession in April 2007.

Concessions will only be applied to the construction and repairing of the hospitals and to the non-clinical areas of the hospitals such as parking, security, and catering.

Thanks to this concession approach, the government believes it will have additional resources of about \$5.3 million to purchase needed equipment:

- Imaging equipment anesthetic instruments and appliances
- Cardiac monitors
- Medical/surgical and laboratory sterilizers
- Mobile dental clinics
- Ambulances

Many private hospitals are expanding existing facilities or planning the construction of new ones. Some of these projects are: Holding Banmedica (\$60

million); Clinica Alemana (\$45 million); Clinica Indisa (\$15 million); Isapre Masvida (\$50 million).

Best Products/Services: After the signing of the Free Trade Agreement between the United States and Chile, most U.S.-made medical equipment enters Chile duty-free. Medical imports, like all products foreign and domestic, are subject to Chile’s 19% VAT (Value Added Tax).

The United States has long been Chile’s most important supplier of medical equipment by supplying around 30% of all imports. Many medical professionals study or receive training in the United States and prefer U.S.-made equipment.

Other competitors are Germany (15% share) and Japan (7% share).

Opportunities: The Ministry of Health is undergoing a major improvement of its hospital infrastructure that will require an investment of about \$600 million in equipment and infrastructure for the next five years. Investment includes the construction and remodeling of 35 hospitals, 11 of them will be new.

Two of these hospitals projects will be opened to concession in 2007. Concessions will only be applied to the construction and repair of the hospitals and to the non-clinical areas of the hospitals, such as parking, security and catering. There will be good opportunities for U.S. companies to supply the necessary equipment for these projects.

Resources:
- The Ministry of Health
<http://www.minsal.cl>

- Medical Professional Association
<http://colegiomedico.cl>
-ISAPRE Association
<http://www.isapre.cl>

For more information, contact Patricia Jaramillo of the U.S. Commercial Service Santiago
Patricia.Jaramillo@mail.doc.gov

CHINA (2007)

Market Overview: China is now the world's third largest market for medical equipment, according to published market data, and continues to grow at a tremendous pace. Another industry source stated that China's medical equipment market topped \$6 billion in 2005. China's medical device market was estimated between \$6.85 and \$7.5 billion in 2006, and is forecasted to reach as high as \$8 billion through the end of 2007. The growth of medical equipment sales was reported at 14% - 15% annually. More specifically, sales of high-end medical equipment, much of which is imported, have been increasing by 20%. Clinical laboratory equipment and reagent sales are growing at about 15-20% per annum. According to incomplete figures from the World Trade Atlas, China's imports of medical equipment accounted for over \$4.6 billion in 2005 and were on track to eclipse \$4.8 through December 2006.

Through the end of 2006, seven of the ten best selling producers of medical equipment in China were reportedly joint ventures and foreign-invested firms. Moreover, the leading fifty foreign and domestic firms in this industry in China account for over fifty percent of total sales and profits. Currently, Chinese end users view U.S.

products as superior in format, quality and the most technologically advanced. China's hospitals particularly welcome medical equipment and products with high-technology content. At the same time, domestic medical device companies are consolidating, upgrading quality, and beginning to compete in medium-level technology niches.

According to the domestic industry medical device association, there are more than 11,800 member manufacturers, 60% of which are privately owned companies. The number of producers is growing annually by 13.4%. Some foreign firms with operations in China also have become members. The top three supplier countries through 2006 in ten major product categories include the United States, which sold \$1.6 billion in all of 2005 and nearly \$1.5 billion worth of equipment during January to November 2006. German exports topped \$831 million in 2005, and were nearing an estimated \$825 million in imports for all of 2006, respectively. Third, Japanese suppliers accounted for \$771 million in exports in 2005 and were projected to top \$804 million for all of 2006.

Positive indicators fueling imports and increased domestic production include the desire to utilize a wider array of advanced technologies in China's 175,000 domestic hospitals & clinics. Currently about 15% of the medical devices in use were made in the 1970s, according to statistics compiled by China's medical devices industry association (CAMDI).

Best products/Services: Best selling prospects, according to the number of registrations of new Class II and

Class III products with SFDA in 2005 include (but are not limited to):

- Therapeutic Products:
 - Tri-dimensional Ultrasonic focused therapeutic system
 - Body rotary Gamma knife, simulator
 - Linear accelerator
- Medical Diagnostic Products:
 - Black & white and colored supersonic diagnostic unit,
 - Sleeping monitor
 - Digital X-ray system
 - MRI, CT, DR
- Operating & Emergency Appliances:
 - Anesthesia ventilation systems
- Components:
 - High frequency and voltage generators

Opportunities: Although the long-term outlook for American suppliers is good, the problem of redundancy in the product registration testing process, the uncertainty of the regulatory environment (the tendering process in different regions and pricing control issues), and the government's efforts to address concerns over accessibility and affordability of healthcare will continue to have an impact upon the profit expectations for U.S. companies doing business in China.

Resources: For general information about this trade show, please contact yang.liu@mail.doc.gov or visit our web showcase for the US Pavilion at the certified trade fair at www.buyusa.gov/china/en/cmef2007.html.

COSTA RICA (2006)

Overview: Costa Rica has a socialized health care system identified as the Costa Rican Social Security System (Caja Costarricense de Seguro Social, or CCSS).

This system includes 29 hospitals: 9 general hospitals, 7 regional hospitals (1 in each geographic region/province), and 13 peripheral hospitals, which vary in size. Sixteen of the hospitals are located in the Central Valley region of the country. Additionally, the CCSS is responsible for 505 clinics, of which 416 are small clinics with only basic equipment, known as "Equipos Basicos de Atencion Integral" (EBAIS), which provide basic medical assistance to patients in remote areas of the country.

The country's hospitals have 5,833 beds that belong to the CCSS (or "Caja" as it popularly known), plus approximately 150 beds in three private clinics/hospitals. The "Caja" buys approximately 85% of the medical equipment in Costa Rica. The public is very sensitive to the government's programs in public health and encourages the replacement of obsolete medical equipment in the principal clinics and hospitals.

In 2004, past irregularities in the purchasing of equipment and medications using funds from Finland and Spain stifled the CCSS procurement of medical equipment over a prolonged period, pending legal resolution. This situation affected importations of medical equipment in 2004 and 2005.

Best Products/Services: The consensus within the local industry is that the U.S. market share for medical equipment for 2006-2007 is expected to grow at an annual rate of 2 to 5%. U.S. market share for medical equipment in 2004 was 50.4%.

There is no significant local production of medical equipment that is consumed directly in Costa Rica. Major U.S. competitors in this sector are Germany, Panama, Japan, China, Brazil and United Kingdom. High quality, reliability, durability, favorable prices, good maintenance service, and timely delivery are the main factors for increasing U.S. sales in the medical sector.

Opportunities: The level of demand for medical equipment in Costa Rica is expected to rise, as most hospitals need to continue replacing obsolete equipment, virtually in all categories of products in this sector.

Resources:

Commercial Service Costa Rica
Commercial Specialist:

Rodrigo Rojas

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<http://www.buyusa.gov/costarica/en/staffusembassy.html>

<http://www.info.ccss.sa.cr/>

CZECH REPUBLIC (2007)

Overview: Although domestic manufacturers are increasingly competitive, over 65% of all medical devices used in the Czech Republic are imported. Germany dominates the market, with 25% of total medical device imports; the U.S. ranks second, and U.S. products, particularly high-tech equipment, have a good reputation for quality. The Czech medical market is very active and competitive. While most new products, equipment and technologies are imported, furnishings -- such as storage trays, cabinets and hospital beds -- are primarily of domestic origin.

Market trends include an increasing life expectancy (72 years for men and 78.5 years for women). Devices used to monitor symptoms and manage disease are in increasing demand. The most common cause of death is circulatory system problems. (Czechs continue to be heavy smokers, and air in many industrial cities is somewhat polluted.)

The combination of an aging population, rising incomes, and systemic inefficiencies is making health care reform a key issue in the Czech Republic. Current issues in the Czech healthcare sector include the following:

- Excess number of acute hospital beds,
- The need to increase patient control over health care decisions,
- The need to better integrate and analyze health care data in order to guide decisions,
- The need for improved promotional competition and emergence of new media channels,
- Promoting research in medical/diagnostic technology.

Growing interest in joint Czech-U.S. projects in the health care field could generate new opportunities for U.S. medical equipment providers. The most significant project to date is the planned International Clinical Research Center (ICRC) at St. Ann's hospital in Brno, a project of the Czech Republic and the U.S. Mayo Clinic. A memorandum of understanding is in place; the research facility will focus on cardiovascular and neurovascular diseases, internal medicine, neurology and oncology. Other Czech regions are eager to develop similar projects, and U.S. partners are in demand. Projects

like these should raise the profile of the health care/biotechnology sector in the Czech Republic and feed demand for high-quality technology and equipment.

Best Products/Services:

- Sterilizing equipment
- Dental equipment
- Bone implants
- Infusion and transfusion sets
- Catheters
- Cobalt irradiators
- Computer processed visual systems
- Medicine infusion pumps
- X-ray and mammography systems
- Balneotherapy equipment
- Endoscopes
- Laparoscopes.

Opportunities:

- Growth of medical tourism in the Karlovy Vary region promises long-term growth prospects for regional hospitals, spas and medical clinics.
- Czech institutions demonstrate strong interest in partnering with U.S. companies, hospitals and universities to create medical research facilities.

Resources:

Ministry of Health

Palackeho namesti, 128 01 Praha 2

e-mail: mzcr@mzcr.cz

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DENMARK (2007)

Overview: Danish legislation defines medical equipment as any instrument,

apparatus, appliance, material, utensil, device, technical aid or other article, whether used alone or in combination, including the software necessary for its proper application intended by the manufacturer to be used for human beings for the purpose of:

a) diagnosis, prevention, monitoring, treatment or alleviation of disease

b) diagnosis, monitoring, treatment, alleviation of or compensation for an injury or handicap

c) investigation, replacement or modification of the anatomy or of a physiological process

d) control of conception and which does not achieve its principal intended action in or on the human body by pharmacological, immunological or metabolic means, but which may be assisted in its function by such means.

Danish medical equipment companies develop, manufacture and market products worth \$5.2 billion a year and employ 29,000 people, 14,000 of them in Denmark. The Danish market for medical equipment reached approximately \$1.2 billion in 2004, an increase of 12% compared to the previous year and an increase of 5% compared to 2002.

Denmark holds a prominent position at both European and worldwide levels. A large number of Danish medical equipment companies export a large part of their production. The overall export rate is approximately 93% of total production. Over a period of 10 years, the medical device industry has more than doubled in exports. In 2004, about 1,000 companies in Denmark were operating in the area of medical equipment. These companies are highly different in terms of size, total sales and

activity. A substantial part of them generate only a small portion of their total sales from medical products, while other companies are quite small. The industry is characterized by a large number of small companies, with the 20 largest companies accounting for approximate 80% of total sales.

U.S. firms interested in entering the Danish market for medical equipment will find that the market is highly competitive and are therefore recommended to establish a local presence, either through local agents and distributors or sales subsidiaries.

Best Products/Services: On an annual basis 4.6 million Danes contact their doctors and 2 million receive hospital treatment. The average life expectancy is 77.1 years, with male life expectancy (74.5 years) significantly lower than female life expectancy (79.9 years). Although Danish obesity rates are amongst the lowest in the world, Danes have a high level of alcohol consumption (ranked 8th in Europe) and smoke more than most of their European neighbors (ranked 5th overall).

Two of the most common causes of death are heart disease (24%) and long-term chronic illness (excluding cancer) (25%). The demographic trend towards an ageing population is frequently debated, and a look at hospital use statistics reveals a definite increase. A comparison of the years 2003 and 1997 there has been an increase in the number of diagnosed diseases in blood and blood-forming organs (46%), diseases of the cutis and subcutis (17%), mental disorders (13%) and endocrine diseases (13%). A review of the change in operations performed shows that the

number of prostatectomy and knee arthroplasty procedures has more than doubled. Over the last 10-15 years, preventive health and health promotion have been given a higher priority in Denmark. This is due to recognition of the fact that the pathological picture today is dominated by social diseases like cancer and cardiovascular diseases.

Best prospects are:

- Equipment:
 - Diagnostic products/accessories
 - Equipment for monitoring patients
- Instruments/disposable products (all mainly for hospital use)
 - Absorbent pads
 - Syringes
 - Needles
- Catheters orthopedic products
- Hearing devices.

Viewed over a seven-year period, the largest increases have been in active implants (including pacemakers), equipment (driven by diagnostic equipment in particular) and instruments. Over a four-year period, the markets with highest growth have been equipment, medical disposables and instruments.

Opportunities: Denmark has a public healthcare system funded primarily via direct taxation of income. As costs have risen and budgets have become tighter, there has been a noticeable shift towards private healthcare insurance and treatments and private healthcare facilities.

Current government policy supports the patient's right to obtain treatment within a three-month time-frame (by offering patients the right to choose which hospital they are treated at or to receive private treatment should the waiting list

be too long). This “relaxation” of patient treatment will, in the long term, give rise to further opportunities to sell medical devices to private healthcare practices.

Resources: More information can be obtained from public authorities:

- Indenrigs- og Sundhedsministeriet (Ministry of the Interior and Health, <http://www.im.dk>)
- Sundhedsstyrelsen (The National Board of Health, <http://www.sst.dk>)
- Lægemiddelstyrelsen (The Danish Medicines Agency, <http://www.dkma.dk> + <http://www.medicaldevices.dk>)
- National Institute of Public Health (<http://www.niph.dk>)
- Serum Institutet (The National Serum Institute, <http://www.ssi.dk>)
- Hovedstadens Sygehusfællesskab (Copenhagen Hospital Cooperation, <http://www.hosp.dk>)

Industry organizations:

- Medicinindustrien (association of medical equipment companies in Denmark <http://www.medicindustrien.dk>),
- Hjælpemiddel Institutet (The Danish Center for Assistive Technology, <http://www.hmi.dk>)
- Dansk Rehab Gruppe (The Danish Rehabilitation Group <http://www.rehabgroup.dk>).

Other resources include: MedCom (<http://www.medcom.dk>) and Sundhed.dk (<http://www.sundhed.dk>).

For further information, please contact [Sabina Kroigaard](#), Commercial Specialist

EL SALVADOR (2006)

Overview: The Ministry of Health, Salvadoran Institute of Social Security (ISSS, Instituto Salvadoreño del Seguro Social), and private hospitals and clinics comprise the healthcare system in EL Salvador. Approximately 80% of EL Salvador’s market is for new medical equipment and 20% for used or refurbished.

Private institutions’ purchases are significantly smaller compared to public institutions. New and used medical equipment are treated the same and may enter the market without tariff. The only applicable tax is a 13% value added tax.

The United States is the main exporter of medical equipment, with 65.7% of the market share in 2004. US products are preferred due to quality, price, customer awareness, and proximity. The main competitor in this sector is Germany, followed by Mexico, and Brazil. There is no significant local production in the country.

Best Products/Services: Hospital Equipment such as x-ray equipment, surgery tables, beds, lamps, cardiac monitors, ultrasonic scanning apparatus, and magnetic resonance imaging apparatus.

Opportunities: The Ministry of Health’s main reconstruction project is RHESSA Project (Hospital Reconstruction and Healthcare Services Extension Project) funded by the World Bank.

The project includes the rehabilitation and reconstruction of 7 hospitals

damaged during 2001 earthquakes, from which 3 were bid as turn key projects during 2005. Ministry of Health expects to announce the tenders for Hospital San Vicente, Hospital San Miguel, and Hospital Zacatecoluca in the first quarter of 2006.

Resources:

- Salvadoran Government tender announcement website: www.comprasal.gob.sv
- Ministry of Health: www.mspas.gob.sv
- ISSS: www.iss.sv
- RHESSA Project: www.prhessa.gob.sv
- CS San Salvador: san.salvador.office.box@mail.doc.gov

FINLAND (2007)

Overview: The total Finnish market for medical equipment was estimated at \$756 million in 2005 by the Finnish Healthcare Technology Association. The operating costs of Finnish hospitals have been reduced, and major hospital procurement is mainly replacing older equipment while buying some new.

However, investments in new medical equipment within the private health care sector are expected to increase. With an import market share of 26%, the United States is the most important external supplier of medical equipment in Finland. Other important external supplier countries are Germany, Sweden, France, Japan, and Switzerland, in rank order.

Best Products/Services: High quality and technically sophisticated medical equipment has the best market potential in Finland, especially equipment that increases efficiency and reduces occupancy rates in hospitals.

Products, such as the following, have the best sales potential in Finland:

- Patient monitoring systems
- Mini invasive surgery (MIS) equipment
- Day surgery equipment
- Magnetic resonance imaging (MRI) equipment
- Video endoscopes
- Digital image processing equipment
- Picture archiving equipment

Opportunities: Medical trade is duty-free within the EU. Import duties are collected from production coming from non-EU countries. The amount of duty for medical equipment exported from the United States fluctuates according to a specific product, ranging from 5-12%.

As a member of the EU, Finland's local legislation concerning medical devices complies with EU directives. Please see www.nam.fi/english/legislation/index.html for further information on both local and EU legislation.

Resources:

- Helsinki Fair Center: www.finnexpo.fi
- Ministry of Social Affairs and Health: www.stm.fi
- National Agency for Medicines, Medical Devices: www.nam.fi
- VTT Industrial Systems, Medical Device Technology Group: www.vtt.fi
- Local contact: merja.poikolainen@mail.doc.gov

FRANCE (2007)

Overview: Total market demand in France for medical equipment was estimated at \$5.5 billion in 2006, with imports accounting for \$3.1 billion. Imports from the United States were forecast at \$926 million, or 30% of total imports. This percentage is expected to

remain approximately the same over the next three years, with overall demand growing at 4% annually.

The best sales prospects for medical equipment include newly developed areas such as non-invasive surgery, orthopedics, and disposable medical equipment. Healthcare professionals are highly optimistic about new technologies such as telemedicine, which is expected to have a major impact on medical care institutions. The recent growth of American medical procedures and techniques in France such as (outpatient) same-day surgery should benefit American medical product manufacturers.

Best Products/Services:

-Diagnosis

The diagnostic sub-sector represents 35% of the total medical equipment market. State-of-the-art diagnostic medical imaging systems are in great demand. Applications for this technology already exist for pediatrics, cardio-vascular care, digestion, urology, and spinal/nerve treatment. As it is well-accepted and effective, the demand for this type of technology will continue to grow. Health care professionals are very optimistic about a feature of medical imagery equipment known as “image networking.” This will dramatically improve diagnostics by providing an image data bank that will enable specialists to compare the image of a current case to hundreds of previous cases.

-Rehabilitation

This sub-sector represents 26% of the total medical equipment market. It includes all types of disposable medical products. The increasing elderly

population reinforces the demand for all kinds of disposable equipment and supplies such as incontinence products and care kits used by nurses and families for home-care.

-Surgery

The surgical instruments and supplies sub-sectors represent approximately 17% of the total sector. Recent developments in the non-invasive surgery field could have a strong impact on everyday practices at hospitals. These latest advances offer superior results and also present a significantly reduced risk to patients.

-Technical Aids

The French market for medical prosthesis, 8% of the total medical equipment market, is characterized by a strong potential for innovative internal prosthesis such as knees, hips, ligaments, and elbows, and with a slightly decreasing market for external prosthesis. The technological evolution, especially in the field of anesthesia, offers the potential for rapid changes in this market.

-Intensive Care

Intensive care equipment such as respiratory monitoring, pumps and incubators represent about 8% of the total medical equipment market. Intensive care equipment includes the latest technological advances. Both public and private hospitals show a rising demand for intensive care equipment and supplies.

-Hygiene

The hygiene sub sector represents approximately 6% of the total medical equipment sector. Patient and medical personnel safety is of growing concern

to both members of the medical profession and the public. Best sales will certainly focus around assuring stringent personnel safety requirements. This is especially due to the concern regarding AIDS and all other contagious diseases. In the future, prevention should receive similar emphasis considering the present focus on protection.

Opportunities: Although the idea of implementing controls on health expenditures is not foreign to developed countries, the expansion of such alternatives has caused a decline in the market for hospital-care equipment.

This decline has created a demand for a whole new range of medical equipment that will facilitate fewer short and long stays in hospitals. The need for medical home-care and long-stay hospitalization for the increasing elderly will bring new prospects for the American medical equipment market. Consequently, the demand for medical equipment and products, which will assist new French health care controls, will continue to increase.

Resources:

- G-MED (Groupement pour l'évaluation des dispositifs médicaux):

National agency for the evaluation of medical equipment

Web Site: [<http://rwww.gmed.fr>]

- Syndicat National de l'Industrie des Technologies Médicales - S.N.I.T.E.M: (Medical equipment trade association)

Web Site: [<http://www.snitem.fr>]

- Embassy U.S. Commercial Service Trade Specialist:

[Alain.Levy@mail.doc.gov]

Phone: (33-1) 43 12 29 02 - Website: [<http://www.buyusa.gov/france/en>]

GERMANY (2006)

Overview: The German market for medical devices is estimated at \$14 billion, approximately 11% of total health expenditures.

There are about 1,200 local medical device manufacturers, which produced medical devices valued at roughly \$9.2 billion in 2003. As a result of health reform efforts and cost-containment measures, local production is expected to increase only moderately, with the total market size estimated to have grown little over 3.3% in the year 2004.

Because of a substantive investment backlog estimated at \$10-15 billion in practices and hospitals, the medical device market is considered a growth market and will continue to provide excellent potential for U.S. suppliers of innovative and price-competitive products. U.S. medical device exporters to Germany hold a 30% market share and will continue to find excellent potential in Germany and other European countries.

Best Products/Services: High quality advanced diagnostic and therapeutic equipment.

The trend is toward innovative technologies such as:

- Laser-optics in vascular surgery
- Urology
- Gastrology
- Dermatology
- Neuro-surgery
- New diagnostic devices as well specialized wound care and home care products.

- Innovative products offering ease of use and cost savings will also be required in the fields of microsurgery, biomedicine, and radiology.

Germany's aging population will continue to fuel growth in several segments, including diabetes, home care, and orthopedic products. According to analysts, these products will only be outperformed by dental implants and hearing aids, where innovation and growth potential are especially high. As a result of increased hospital admissions and demographic developments, sales of surgical supplies and of products for incontinence also show high growth potential. Medical devices for intensive care and general nursing experienced an average increase of 3%, while dressings showed only a very modest growth of 1% due to stagnating demand.

Opportunities: Due to the general drive towards realizing cost savings in the medical sector, major projects in this sector could not be identified. As a result of the 1993 Healthcare Reform Act, there are still no large-scale new hospital projects, but rather plans for moderately modernizing current inventories. Diagnostic centers and the combination of practices with private home care are attracting more attention than construction or expansion of traditional hospitals.

Resources:

German Government Agencies:

German Health Ministry:

www.bmgs.bund.de

Federal Agency for Pharmaceuticals and Medical Products: www.bfarm.de

Federal Bureau for Physical-Technical Equipment: www.ptb.de

Federal Institute for Risk Assessment: www.bfr.bund.de

Federal Institute for Consumer Protection and Food Safety: www.bvl.bund.de

Trade Fairs:

MEDICA: www.medica.de

Trade Associations:

Federal Association of the Medical Devices Industry: www.bvmed.de

Federal Association of the Electro-Medical Industry: www.zvei.de/medtech

German Hospital Association: www.dkgev.de

Medical Dealers Association: www.fmp.de

Commercial Service Contact:
anette.salama@mail.doc.gov

GREECE (2006)

Overview: The Greek market for medical equipment is dominated by imports which supply 90% of the demand. Approximately 60% of Greece's imported medical equipment and supplies come from EU countries i.e., Germany, France, UK and Italy. Local production in Greece in this sector is small with minor exports to third countries.

Exports include furniture, inexpensive manual wheel chairs, bandages, gauze,

and other rudimentary hospital supplies. Only one Greek company manufactures advanced medical equipment (artificial kidney and hemodialysis equipment).

The Greek medical equipment market continues to experience growth of 8% annually. Because of the 2004 Olympic Games, the demand for medical equipment and supplies reached even higher levels in 2003 and 2004.

Best Products/Services: U.S. medical products enjoy an excellent reputation in Greece and are considered to be of the highest quality and technology. There is a steady growth of imports from the U.S. in this sector and this is expected to continue growing at an average annual rate of 10-15% during the period 2003-2010.

Medical equipment consumption is concentrated primarily in the public sector, which accounts for 60-70% of the total purchases in this field. U.S. suppliers should be aware that agents and distributors of medical equipment sometimes experience long delays in receiving payment from state-owned hospitals. Local business partners generally, but not always, cover these delays.

The GOG is currently implementing an I.T. development program, 'IASYS', to modernize the technological capabilities of Greek hospitals. This program is expected to be completed in two phases: first phase, by the end of 2005, for major hospital units located in the larger cities, and second phase, by the end of 2006, for the rest of Greece. Upon the completion of the 'IASYS' project, all hospitals in Greece should be able to

exchange information via a national database.

Private health care, taking advantage of the gaps and inflexibility in the public system, is experiencing steady growth. Many private clinics are extending their services to include those formerly available only in large, public hospitals. Consequently, the demand in the private sector for modern medical equipment has increased substantially during the last decade. This trend is expected to continue through 2010.

Most promising sales prospects for U.S. suppliers of medical equipment are in sub-sectors such as surgical equipment and supplies, electro-medical equipment, I.T. systems, tele-medicine technology and all types of medical technology.

Opportunities: In the post-Olympic Games era, improvements and corresponding investments are also anticipated. These include expansion of hospital ambulance fleets, procurement of quick response vehicles, mobile surgery units, and vehicles for servicing disaster and disease relief efforts, small medical stations, and doping-control labs. Estimated cost of this equipment exceeds \$250 million.

The EU awards grants to improve the standard of living of European citizens. Between 2000 and 2006, approximately 1.35 billion euros of E.U. funds will be spent for the improvement of medical and health care in Greece with a special emphasis on the development of Regional Healthcare Centers throughout the country and improved restructuring of the healthcare sector.

A state of the art private health park is planned for Athens and the participation of U.S. firms is vital to its successful development. It will be constructed to the highest international standards and will be the largest, most modern and well-equipped health park in Europe. U.S. firms have the opportunity to provide equipment for this health park, as well as consulting and managerial services.

The Government of Greece intends to collaborate with private investors in order to promote projects in the broader public sector using the method of public private partnership. The Greek Ministry of Health and Social Solidarity is looking for partners from the private sector for the design, funding, construction and maintenance of selected health care projects with high “Value for Money” characteristics for the Greek citizenry.

For the moment, the Greek Ministry of Health and Social Solidarity is planning the development of the following projects:

- _ A general hospital of about 800 beds (Athens).
- _ A pediatric hospital of about 500 beds (Thessaloniki).
- _ A transplant center of about 250 beds (Athens).

Resources: <http://www.mohaw.gr>

GUATEMALA (2006)

Overview: Public and private institutions comprise the healthcare system in the Central American countries of Guatemala, El Salvador, Honduras, Nicaragua, and Costa Rica.

The public sector is the primary purchaser of medical equipment through the Ministries or Social Security Institutions. Ministries provide healthcare services through local hospital networks, health units, rural clinics, and other health providers, except in Costa Rica where services are provided by the National Social Security System (CCSS).

The private sector includes private hospitals and clinics. Their purchases are significantly smaller compared those in the public sector.

The market for new medical equipment is considered to be strong in the region. Although some private clinics/ hospitals have purchased used or refurbished medical equipment, the public sector often purchases new equipment.

Currently, approximately 80% of the Central American market is for new medical equipment; 20% for used or refurbished. Key factors in the purchase decision are price, quality, and post-sale service. It is highly recommended that U.S. companies have a local representative and work closely to determine the most effective product promotion strategy. To successfully penetrate the market, it is important the have a continuous market presence, provide brochures in Spanish, and have good after-sales services.

There are no import restrictions for the importation of new or used medical equipment to the Central American countries. Import taxes in the region vary: from 0-15% import duties (applied against CIF value) and a 12% - 13% value added tax (12% for Guatemala).

The market for Medical Products in Guatemala is divided into two segments: the Private Sector and Public Health. There are eight major medical product distributors and more than 50 small distributors operating locally. As a rule, the Private Sector mostly purchases American products, due to their appreciation of high quality.

The Government, on the other hand, is price driven and will purchase generally based on lower cost. Once a year, the Government publishes its needs for Medical Devices in the month of October. This is when interested parties must prepare their bids and, if selected, they will be suppliers for their one-year needs.

In order to be eligible for the bidding process, American firms must have a local office, agent or distributor to be considered an official supplier, and must consider that all products require sanitary registration. This registration process takes approximately two months and has a four hundred dollar cost per product. (This price is approximate and includes most of the requirements needed). Many American firms find distributors in Guatemala that will manage their official registrations and participate in the National Bidding Process on their behalf.

Best Products/Services: Replacement of obsolete equipment and infrastructure expansions projected for hospitals and small rural clinics will increase imports of medical equipment in the region. Best prospects for U.S. companies are for the following products:

- Diagnostic imaging equipment
- Surgery tables

- Cardiac monitors
- X-ray equipment
- Respiratory ventilators
- Ceiling lamps
- Ultrasonic scanning equipment
- Magnetic resonance imaging apparatus.

Other opportunities within the industry can be found in the following disposable medical devices:

Gloves (sterile and non-sterile), bandages, plastic bandages, immobilization products, all type of sounds, catheters, medical and surgical apparel, corrugated tubes, universal tubes, syringes and any disposables needed for hospitals and home care.

Opportunities: It is important to be aware of National Contests, now available on-line at the “Guatecompras” website. The biggest contest is published in October and finally negotiated in January.

Distributors are a market to pursue. There are eight-to-ten large distributors and importers in Guatemala and many smaller ones willing to broaden their line of products by importing high-quality and price-competitive devices.

Resources:

- US Commercial Service in Guatemala www.buyusa.gov/guatemala
- Official website for Government Tenders www.guatecompras.gt
- Guatemalan Chamber of Industry www.industriaguatemala.com
- Statistical information www.sieca.org.gt

HAITI (2007)

Overview: Rural population increases are reducing availability of arable land, while migration to Haitian cities has accelerated the number of people living in slums to more than half of Haiti's population of 8.5 million. This has put pressure on cities, highlights the lack of adequate urban sanitation infrastructure, and is exacerbating concerns about public hygiene.

The lack of water in sprawling shanty towns increases the risk of public hygiene problems. The Haitian Government does not have the health resources to confront the explosive population increase in cities and a heavy urban demand for health care services.

As a result, there are significant opportunities for providers of health care services and medical equipment. Fifty percent of medicinal and pharmaceutical products sold in pharmacies come from Canada, South and Central America, India, and China; there are few European products. Ten percent of medicinal products come from the United States.

Best Products/Services: The Haitian Government, with the help of Non-Governmental Organizations (NGOs) funded by international donors, is trying to develop a health program throughout the country. It intends to purchase and repair health equipment in public hospitals and medical centers. A niche market exists for low-tech refurbished U.S. medical equipment in both the public and private health sectors. Generic drugs and prescription antibiotics also represent a good niche market for U.S. manufacturers. There are three local drug manufacturers and

distributors, which rely completely on imported products, including finished products and raw materials.

INDIA (2006)

Overview: According to the World Health Report, India spends about 5% of its Gross Domestic Product (GDP) on the healthcare sector. This figure will rise to between 6.2 and 7.5% of GDP by 2012. In real dollar terms, 2002 healthcare spending was \$25 billion, which is expected to increase to \$47 billion by 2012. About 50 % was spent on curative and primary care and another 40% on secondary care, including medical specialists in major hospitals with expensive diagnostic equipment. The remaining 10% of the market is left to preventive care such as health education, and weight reduction plans.

The medical infrastructure in India is far from adequate. The country has about 525,000 doctors (0.52 per thousand people), 737,000 nurses (0.72 per thousand people), and about 870,000 hospital beds (0.9 per thousand people). Despite government efforts, the demand for hospitals and beds far surpass availability. The problem is most acute in rural India, which accounts for over half of India's population. About 80% of available hospital beds are located in the urban centers, leaving only 20% for the larger rural population.

The Government of India (GOI) is aware of the acute shortfall in medical services in rural areas and is targeting many of these hospitals for future upgrades.

The Indian population of one billion people is growing at a rate of 2.5% per year though only about 100-150 million have the demand for, and the

discretionary income to afford, private health care services. In addition, less than 1% of the Indian population had any health insurance coverage in 2004 though this number is expected to rise to 10% by 2010 as the private sector continues to aggressively market health insurance.

Nonetheless, many in the growing “middle income” segment look for international quality medical services in private and specialized hospitals, and this trend is expected to continue for the next five years and beyond.

The establishment of a number of super specialty hospitals and diagnostic centers was due in part to favorable government policies including a reduction in import duties on medical equipment. Successful medical insurance programs have also contributed to the increased use of specialists and advanced medical facilities. Many members of the middle-income group are now looking for better health insurance programs with higher insurance limits.

The new dynamic in the health insurance sector will create increase demand for high-end medical facilities and equipment.

New specialty and super-specialty hospital facilities being planned for the government and private sectors depend on the import of high-end medical equipment. Several international companies have established manufacturing facilities in India to assemble equipment such as ultrasound scanners and mobile X-ray units for the domestic market and for export sales.

These companies also import products and components as needed for sales or manufacturing.

Medical tourism is fueling additional growth in the Indian healthcare sector. In 2003, private hospitals attracted over 100,000 medical tourists who spent approximately \$333 million. The cost of most major surgeries in India is much less than the cost for the same surgery in a developed economy. The healthcare industry is now proactively creating standards for the medical tourism industry with the help of credit rating agencies, insurance companies and others involved in the self-regulation of the sector.

Best Products/Services: The most promising sub-sectors in the medical equipment industry, with estimated market sizes for the year 2005-2006, are presented below:

| Sub-sectors Market size in 2005 (\$ million) | |
|---|--------|
| General Surgery | \$ 677 |
| Medical Imaging Equipment | \$ 312 |
| Cardiology Equipment | \$ 417 |
| Cardiac Surgery | \$ 198 |
| Ophthalmology | \$ 96 |

Opportunities: India’s disease profile is changing. Treatment for lifestyle diseases is expected to become a major market in the future and will require a heavy investment in equipment and technology.

A proper supply of equipment and medical consumables will also be an area with significant opportunity for American companies. Several leading U.S. purveyors of hospital equipment and supplies have opened Indian operations to cater to this growing market.

Health insurance and hospital administration is another area in which U.S. companies can make a difference. This opportunity includes introducing and maintaining industry standards, and also classifying and certifying health care centers.

Building, equipping and managing super specialty hospitals is another area for future growth.

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IRELAND (2007)

Overview: The medical devices industry currently consists of some 100 manufacturing companies that employ approximately 22,000 people in Ireland. The sector is characterized by significant and continuing U.S. investment with 15 of the world's top 25 medical technologies companies having significant operations in Ireland.

Best Products/Services: International manufacturers use Ireland as a manufacturing and sales base and export their output to European and worldwide markets. Many companies operate in niche sectors with predominant activity centered on non-powered passive devices.

Sub-sectors include interventional products, orthopedic implants, contact lenses, microelectronic devices, dental, hearing and disposable products.

Indigenous manufacturers are primarily small-scale companies producing disposable products. However, an increased interest in hi-tech products and R&D is rapidly emerging. The government of Ireland has pledged over \$363 million to support a range of projects to develop research and development infrastructures, provide training and to facilitate technology licensing and industry development.

Opportunities: Following from the publication of the National Health Strategy Plan 2002 – 2011 in November 2001, the Irish government's attention has turned to the radical reform of the healthcare service industry. A series of reports have been published which outline proposed steps to create a system

that is more accountable, efficient and capable of responding to emerging public needs through focusing on reorganization, financial management, manpower issues and information management. The reform of the sector will bring new and extensive opportunities for U.S. medical device and telemedicine companies in the medium to long term.

The U.S. dominates the import market as U.S. medical devices and equipment enjoy a strong reputation among Irish medical personnel. Most promising sub-sectors include medical instruments, disposable medical products and electro-medical apparatus. Major opportunities also exist for sub-supply companies as manufacturers increasingly source from the local market.

Resources: Irish Medical Devices Association <http://www.ibec.ie/imda>

ISRAEL (2007)

Overview: Israel's \$280 million medical instruments market (HS 9018) holds great potential for American exporters. Over 80% of this market is imported, mainly from Europe (50%) and the United States (30%). Israel's mandatory National Health Insurance (NHI) provides a universal package of healthcare services to all Israeli citizens, regardless of age or medical condition. It defines a comprehensive list of medical services to which each citizen is entitled.

Demand for high-end medical instruments and supply is growing, due to advances in medical practices and the constant addition of new procedures to the NHI healthcare package.

The National Health Law provides basic healthcare services for every citizen through four health insurance organizations known as "Sick Funds." The private sector offers additional services including dental care, plastic/aesthetic surgery and alternative medicine. A quick comparison between Israel's healthcare market in 1995 and 2003 reveals that the number of hospital beds increased by 24%; the number of nursing and elderly home beds grew by 62% to 20,560 beds; the number of private in-patient hospital beds was up 57% to 12,304 beds.

Best Products/Services: Israel's medical equipment market continues to present an outstanding export potential to U.S. manufacturers of medical devices, instruments and disposables in the following categories:

- Imaging instruments
- Cardiology equipment
- Equipment and supplies for plastic surgery
- Dental instruments
- Equipment and technologies for pain management and physiotherapy
- Ozone & oxygen therapy
- Equipment & single use products

Opportunities: Only 30% of Israel's medical devices market was imported from the United States. European products continue holding a stronger position, accounting for 50% of the market.

Technology & Research Cooperation: Israeli medical companies are ranked third worldwide in the number of granted patents per capita, reflecting the highly innovative nature of Israel's local medical industry.

Opportunities for U.S. companies exist in the area of research, clinical trials and academic and professional exchanges. Israel's 250 medical device companies develop implantable and disposable therapeutic devices for cardiovascular and peripheral vascular disease, oncology, neurodegenerative diseases and other age related diseases such as ophthalmic and orthopedic. Other industry areas include diagnostic, imaging and monitoring devices. A smaller number of companies focus on medical fields such as endocrinology, wound-management and respiratory disease.

Promotional Opportunities:

The U.S. Commercial Service in the American Embassy in Israel helps American exporters enter the market through partner search and trade promotion programs.

Resources:

- Israel Central Bureau of Statistics

ITALY (2007)

Overview: The Italian National Healthcare System (SSN) was established in 1978 to provide essentially free medical care at the point of use to all Italians. Thus, the SSN is by far the major healthcare provider in Italy. The Ministry of Health, through triennial national health plans, establishes the fundamental objectives of healthcare, including preventive care, therapy and rehabilitation. It defines the level of healthcare guaranteed to all citizens and issues guidelines for the organization, delivery and funding of healthcare services paid by the SSN.

Italy's 2005 healthcare spending totaled \$145.8 billion, with a per capita total expenditure of 2,258 dollars. The 20 Italian Regions, which have the primary role in setting and implementing healthcare policies, are responsible for developing regional health plans and for organizing and delivering healthcare services through local "Health Units". Regions, and not the central government, are responsible for any deficits and are required to cover them by instituting co-payments and increasing regional taxation. The SSN receives its funding through the National Health Fund, appropriated every year through the Government of Italy's budgetary legislation.

Public healthcare accounts for 76.4% of total expenditures for medical equipment and products, with the balance being held by private healthcare facilities. In addition, the SSN purchases a significant portion of healthcare services from private providers. The SSN has jurisdiction over 196 large hospitals and 600 medium and small size hospitals, which are managed by 197 Local Health Authorities. The total number of beds in the public sector is 220,932. The average stay in public hospitals is estimated to be 7.1 days at a cost of \$ 750 per day. In addition, public healthcare manages 7079 outpatient facilities, 1506 residential facilities for the elders and 4794 other healthcare facilities. Private healthcare service-providers account for 637 private and independently operated clinics, the majority of which, 531, are endorsed and operate within the SSN. The total number of beds in private healthcare facilities is 60,000. The average stay in private clinics is indicated at 7.0 days.

Best Products/Services: The best sales potential for U.S. manufactured medical equipment are expected to be in the following areas:

- High frequency medical lasers (for multiple applications)
- Endoscopes and image cytometry apparatus
- State of the art diagnostic equipment
- Non-invasive and micro-surgery devices and equipment
- Anesthesiology equipment
- EKG
- Stimulators and defibrillators
- Monitoring equipment
- Telemedicine equipment and services.

At the present time, a large percentage of the electro-medical equipment in use in public hospitals is obsolete. A replacement policy is gradually, though slowly, taking place. The Italian market is receptive to high quality and technologically advanced diagnostics and therapeutic equipment and products.

The Italian market for medical equipment is highly dependent on imports. Major suppliers are the United States, Germany, France and Japan. Domestic production is good in such areas as radiology, ultrasonic medical equipment and various segments of the overall dental sector. It is, however, limited in area of the most sophisticated medical products and equipment, those for which investments in R&D are of critical importance.

Opportunities: It is up to Regional Governments to issue specific regulations governing procurement of medical equipment. Most purchases are made by public tender and are open to both domestic and foreign companies. Announcements of tenders on public

procurements are monitored by the U.S. Mission to the European Union and can be accessed through the webpage: www.buyusa.gov/europeanunion.

The Italian government is currently considering a reform of the procurement process that would provide for centralized purchasing and has been criticized by industry associations for making price the deciding factor in acquisitions. In general, it is unrealistic for a foreign firm to believe that it can navigate the cumbersome bureaucratic procedure of public procurement without having a base in Italy or a strategic Italian partner. Companies that want to participate in public tenders must first qualify by submitting adequate evidence of their business experience and professional expertise.

Bidding specifications normally include a detailed technical description of the product, as well as other requirements, such as the CE mark, safety standards, testing procedures, operation manuals and quality assurance. Award criteria are normally based either on the lowest price or on the most economically advantageous quotations.

Financing in the medical products sector adheres to normal business standards used in Italy and is usually handled by banks. The turnaround times for paying invoices by public hospitals are quite long in Italy. They may range from a minimum of 100 days in some regions of the North of the country, to over 360 days in certain regions. This situation causes serious liquidity problems for Italian importers and distributors. The mark-up imposed by local distributors and importers has to compensate for the financial losses caused by very late

reimbursements. Private clinics also tend to delay payments, usually by an average of 120-180 days.

Resources:

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JAPAN (2007)

Overview: The Japanese medical equipment and supplies sector ranks second in the world and continues to be an extremely successful market for American firms, representing one of the few sectors where the United States has consistently achieved trade surpluses with Japan. The value of Japan's medical device sector has been approximately \$18 billion for the last few years.

Traditionally, imports account for approximately 40% of this figure, with American firms supplying approximately 60% of all imported products. Total U.S. sales in this sector, including local production by American companies, are valued at more than \$6 billion annually.

Although, U.S. firms have historically done well, one problematic issue for the sector persists: the speed of the regulatory review process. The establishment of the Pharmaceutical and

Medical Devices Agency (PMDA) in 2004 and the implementation of the major Pharmaceutical Affairs Law (PAL) changes were designed to improve and —hopefully — accelerate Japan's review process. PMDA, however, has encountered difficulties in achieving faster reviews. A revised PAL, which went into effect in April 2005, in fact, increased the burden on applicants both in financial and practical terms due to its complicated regulations. Even large-scale companies are experiencing difficulties meeting the new requirements.

In addition, the Japanese Government continues to focus on reducing medical device prices to counterbalance the increasing healthcare expenditures resulting from a rapidly aging society. The Japanese government contends that excessive prices are paid for medical devices in Japan in comparison to other world markets. To cope with this situation, the Japanese government instituted in 2002 a "Foreign Reference Pricing" (FRP) system to cut device prices by linking those to lower prices in overseas markets.

The result from these price revisions (in April 2002 and April 2004) has been significantly reduced prices on products supplied by U.S. firms.

Unfortunately, the upcoming price revision in April 2006 will continue this trend. The government and ruling coalition parties agreed in December 2005 to reduce medical service fees by 3.16% for JFY 2006 — the largest cut ever made. Of the total reduction, 1.36% will come from doctor's fees (which had been previously cut by 1.3% in 2002) and the remaining 1.80% will come from

regular drugs (1.60%) and medical devices (0.20%).

Overall, Japan's market for medical devices is expected to exhibit flat to negative growth in 2006.

Best Products/Services: Although the business environment is not positive, American firms will continue to see sales prospects in the more technologically sophisticated product categories; especially where there is a lack of local competition.

Those products include:

- Pacemakers
- Advanced interventional cardiology products
- Artificial implants
- Catheters
- Stents

Other areas of projected strong demand include software and other products used in medical information systems and telemedicine.

Resources:

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JORDAN (2007)

Overview: Jordan's health care system is regarded as one of the best in the region. Jordan has become a medical tourism destination in the region by offering relatively high-quality care at comparatively inexpensive rates. The boom in private hospitals is keyed to this growing "medical tourism" trade. Medical tourism generates about two-thirds of all the tourism income to Jordan, as patients often travel with their

entire families and/or stay for relatively long periods.

Jordan's health care system uses the latest technologies and has highly educated and well trained doctors. Many Jordanian physicians have received some form of medical training in the U.S., giving U.S. products good exposure. Jordanian doctors are respected throughout the region for their expertise, hence their choices of technology influences buying decision throughout the region. Many doctors in the region are trained in Jordan, and many Jordanian doctors work in neighboring countries.

The influence of Jordanian doctors' choices in medical technology can impact buying decisions in other countries where they practice. This raises the incentive for US firms to enter the Jordanian market.

Primary health care sector reforms underway include renovating and adding medical diagnostic devices and therapeutic equipment; improving the quality of health care and hospital services; upgrading hospital infrastructure; and developing and implementing health information systems.

Medical equipment: Demand for medical equipment and services should increase during the next few years with the increase in the number of government and privately owned hospitals; new equipment for hospitals under construction; renovated equipment to replace existing equipment in functioning facilities; upgrading clinics and health care structures; expanding health insurance coverage; and shifting

from older conventional methods to modern treatment methods.

Best Products/Services: Jordan's medical equipment market presents U.S. companies with good opportunities in the following categories:

Best Project Prospects

Attractive projects expected to come on line within the next five years in the private and public sector include: Drugs Quality Control Laboratories/ MoH, Al-Bashir renovation and remodeling/ MoH – 850 beds, Pediatric Children Hospital-National One/ Military, and Princes Haya Hospital, Aqaba – 200 beds.

Best Services Prospects

- Consulting in hospital administration, quality control and certification standards
- Training
- Hospital software for hospital administration and laboratory test results

Best Product Prospects

Given the hospital redesign projects and private clinics investments the following equipment offers excellent sales prospects.

HS #

9018: Medical Equipment; C-T Scanners; MRI; PET Scanner; Physiological monitoring; Kidney Dialysis equipment reagents for automated laboratories; Laparoscopy surgery; Endoscopy; Cardiology equipment; Cardiology surgery; Ophthalmology; Neurosurgery; Oncology; Medical Supplies; Electromedical Equipment; Other Medical & Equipment Instruments; Other Electro-diagnostic Apparatus ; UV/IR Apparatus; Surgical Medical

Equipment; Radiology and Imaging equipment; Sonography equipment; Endoscopy equipment and flexible scopes; Anesthesia and operating theatres; Laparoscopic surgery; Hospital/ Clinical furniture; Sterilization equipment; and Surgical instruments.

3926: Equipment and supplies for plastic surgery

7017: Clinical laboratories
Tubes/Glasses

8419: Medical Surgical Sterilizers

9022: Medical x-ray, Alpha, Beta, Gamma Ray Equipment

9021: Orthopedic & Prosthetic Appliances

9027: Clinical Lab Diagnostic Equipment; and Clinical laboratories Equipment

Opportunities: Only 22% of Jordan's medical devices market was imported from the United States.

European products continue holding a stronger position, accounting for 40% of the market. The market environment presents an excellent opportunity for American exporters that are interested in entering this market, but they must provide full support to their local agent or distributor. Major U.S. and international brands are directly represented (GE, Siemens, and Philips). The market is receptive to U.S. products, valued for their technological sophistication, but is sensitive to the need for highly reliable, quality after sales support and service, as well as price.

Resources: Jordan Ministry of Health:
www.moh.gov.jo

KAZAKHSTAN (2007)

Overview: Kazakhstan's healthcare sector accounts for 2.6% of overall GDP. The Government recently adopted a new program for reformation and development of this sector in 2005-2010. This program envisions increasing state healthcare expenditures to up to 4% of GDP by 2008. Priorities stated in the program include reformation and development of the country's primary healthcare networks, improvement in its public health administration system, provision of enhanced medical personnel training, enhancement of mother and child health services, emphasis on preventive measures such as diagnostics, treatment of social diseases, and patient rehabilitation. The program will be financed from national and regional budgets, and will total about \$1.3 billion.

Demand for medical equipment in Kazakhstan is expected to increase due to the sustained growth of the economy and increased healthcare spending, as well as the recognized need to replace obsolete equipment, which comprises about 80% of the medical equipment in the country's public hospitals. The public sector purchases approximately 85% of medical equipment in Kazakhstan. Most procurement for public healthcare institutions is done through government-organized tenders.

From 2005 to 2006, the market for medical equipment in Kazakhstan increased by an estimated 65%. Almost all of the medical equipment in Kazakhstan is imported. Medical equipment imports from 2005 to 2006 are expected to increase by 66%, reaching an estimated \$300 million. The U.S. market share was 11% in 2005,

after U.S. sales rose from \$15.1 million in 2004 to almost \$19 million. In 2006, imports of U.S. equipment reached an estimated \$22 million, while market share declined to 7.4%. America's closest competitors are Russia, Germany, and Japan. Local production of medical equipment in 2006 accounted for only 1.3% of the total market.

Best products/Services: The best sales potential for U.S. medical equipment in the coming years is expected to be in the following areas:

- Electro-medical diagnostic and therapy equipment
- Diagnostic imaging with a special emphasis on X-ray equipment and supplies
- Surgical supplies
- Dental equipment and supplies
- Test kits, including HIV/AIDS blood testing
- Laboratory equipment
- Equipment for cardio surgery

There are about 10-15 well-established, reliable importers of medical equipment and instrumentation, all in strong competition to meet the demands of the local medical authorities that organize procurement tenders. Most of the wholesale distributors are located in either Almaty or Astana.

Opportunities: In 2006 the government developed a program for further development of cardiological health services and cardio-vascular surgery for 2007-2009. Stages of the program include creating thirteen cardio-vascular surgery divisions and four regional cardio centers, and training over 200 specialists in cardio-surgery at leading foreign cardio centers. There is a large-scale construction of medical facilities in

Astana, including a diagnostic center, children's out patient polyclinic, a maternity hospital, prenatal center development, city ambulance center, and medical research center. A new Center for Nuclear Medicine is planned for construction in Almaty in 2007, which should create demand for radiopharmaceutical products used in diagnostics of cardio-vascular and oncological diseases.

To solve the problems of mother and child health, a range of projects aimed at improving obstetrics and childcare was also introduced. In particular, activities on prenatal aid for 2004-2010 were developed on the basis of recommendations from the World Health Organization. Equipping of child and obstetrics hospitals with modern medical instruments is one of the priority tasks of the government.

The Ministry of Health of Kazakhstan continues to work on the introduction of telemedicine and mobile medicine in the rural regions of the country. The goal of the project is an improvement of diagnostics and treatment in rural hospitals, improved access to quality healthcare for rural citizens, and further professional development of medical personnel.

Resources:

- Kazakhstan International Healthcare Exhibition: <http://www.kihe.kz>
- Ministry of Health: <http://www.mz.gov.kz>
- National Center of Expertise under the Ministry of Health: <http://www.dari.kz>
- Pharmaceutical news in Kazakhstan (Russian and English): <http://www.pharmnews.kz>

For more information contact
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MALAYSIA (2007)

Overview: Malaysian public healthcare is heavily subsidized by the government. Currently, approximately 3% of the GDP is allocated for the healthcare sector.

The Malaysian healthcare industry; which includes product and equipment, is currently valued at nearly \$1.3 billion and is expected to grow to nearly \$3 billion by 2007. About 400,000 different types of medical devices are used annually. The majority of high-tech medical devices are still imported. The US has the largest import market share of 24% in 2005.

The Medical Devices Act will be implemented by 2008. Online voluntary registration is currently on-going through the Ministry of Health (MOH) Voluntary Registration of Medical Devices Establishments [MeDVER](#).

About \$2.7 billion has been allocated for the health sector development during 9th Malaysia Plan (2006-2010). Several institutions were proposed during the 9th Malaysia Plan: a Communicable Disease Center, National Crisis (Health) Preparedness and Response Center, a National Cancer Institute and a National Oral Health Institute.

The Government has implemented needle exchange and condom handout program for drug addicts in its attempt to contain the spread of HIV/AIDS. Over 300,000 Malaysian are projected to have HIV/AIDS by 2015. In addition,

methadone substitution therapy has proven to be effective.

The National Cancer Registry reported that about 40,000 Malaysians develop cancer every year. The MOH is planning a five-year master plan to provide comprehensive cancer care, which will include early detection, diagnosis, treatment, prevention, rehabilitation, hospice care, herbal therapy and training.

Promotion of health tourism includes developing a comprehensive package of health services that Malaysia has comparative advantage such as spas and cosmetic services. To further position Malaysia as a global healthcare service hub, the Tourism Malaysia Ministry has unveiled a health tourism portal in conjunction with Visit Malaysia Year 2007.

Best Products/Services: The increasing senior population and modern lifestyle diseases are expected to boost demand for more affordable quality drugs and equipment.

Increased demand for more personalized healthcare solutions, prevention and follow-up care. Domestic firms are encouraged to manufacture medical equipment locally. This provides additional opportunities for U.S. companies interested in creating joint ventures with domestic companies.

Opportunities:

- Post-acute healthcare service, which involves providing healthcare and nursing services for patients at their homes.
- Construction of new and replacement hospitals.

- Implementation of hospital information system (HIS) in selected hospitals and clinics in improving healthcare delivery.

Resources:

- APHM International Healthcare Conference and Exhibition 2007
- Ministry of Health Malaysia
- Malaysian Medical Association
- Association of Private Hospital of Malaysia

For more information contact
Commercial Specialist Natila Ahmad.

MOROCCO (2006)

Overview: Morocco is a leading country in the African region in terms of health care equipment and services. Morocco serves as a health care center for Sub-Saharan neighboring countries, which lack equipment.

Though health care expenditures seem small according to international standards (4.6% of Morocco's GDP), there has been a yearly increase of 10%, since 1999. The budget allocated to healthcare increased from \$400 million in 1999 to \$700 million in 2005. In 2005, Government expenditures amounted to \$131 million for procurement of medical equipment and \$121 million for other public hospital expenditures.

To meet the population growth rate (1.4%) and the domestic growing demand for modern and western health care standards, the Ministry of Health plans an annual budget increase of 13% to implement its 2003-2007 Action Plan. Under this plan, the Ministry will build 4 new cancer hospitals, upgrade 120 existing hospitals with modern

equipment, increase hospital in-patient capacity, improve hospital operations, and automate the systems. In addition, the law 65//00 on the mandatory health care coverage (Assurance Maladie Obligatoire “AMO”) was implemented in August 2005. This new law will increase the health coverage from 20% to 40% in the first six months and aims at rapidly reaching 80%.

The public sector has 127 public hospitals, 4 University hospitals (Centres Hospitaliers Universitaires “CHU”), which are autonomous but under the general supervision of the Ministry of Health, 4 military hospitals and 14 Social Security hospitals, (Polycliniques de la Caisse Nationale de Securite Sociale “CNSS”), which belong to the national social security, and are slated for privatization. The public sector has 89,057 hospital beds and 380 operating theaters, and serves the largest percentage of clients. The public sector provides the basic health care (immunization) as well as the highest-end medical care (cardiology, oncology, gastro-enterology, radiology, surgeries, etc.). A few cases are referred to foreign hospitals. The private Sector has over 248 private clinics, which compete with the public sector. Due to the growing demand, this number is increasing rapidly. In addition to the private clinics, private radiology centers provide radiology services exclusively.

Best Products/Services: Local medical material and equipment production is extremely low and limited to basic and technologically basic material. It is mainly centered on furniture, which does not comply with international standards, and single use material, such as bandages and syringes. Morocco relies

on imports to supply hospital facilities with technologically advanced medical devices, such as:

- Ultra-sonic scanning
- Magnetic resonance imaging
- X-Rays
- Electro-diagnostic equipment
- Computerized tomography
- Monitoring equipment
- E-medicine, equipment and related software.

Opportunities: With a total of 407 healthcare centers offering a total of 34,445 beds (1.15 hospital beds per 1,000 inhabitants), Morocco offers growing opportunities in terms of medical equipment and services in the public and private hospitals, as well as radiology centers.

U.S. technical and managerial expertise in the health field is highly regarded. With this reputation, U.S. firms could benefit tremendously from reforms in the health sector, as well as the U.S. Morocco Free Trade Agreement, which will abolish import duties and offer a “competitive import advantage” over European competitors.

Resources:

- Ministry of Health:
<http://www.sante.gov.ma>
- National Social Security (Caisse Nationale de Securite Sociale):
<http://www.cnss.ma> or
<http://www.damancom.ma>

NEPAL (2007)

Overview: Sales in this sector may continue to grow, as the degree of medical training and services a middle class can afford increase. At present most of the imported drug and

pharmaceutical products are imported from India. Demand in this sector has continued to grow in spite of the political situation. In contrast, total imports of medical equipment have declined in the last two years. The decline is largely attributed to the worsening security and political situation in the country. This market has the potential to bounce back as the security situation improves.

Best Products/Services:

- X-ray machines
- Ultra Sonographic Machines
- ECG machines and other testing equipment.
- Instruments and appliances used in medical, surgical, dental or veterinary sciences, including electro-medical and sight testing.

Opportunities: Private sector medical facilities are expanding very quickly in Nepal. In recent years almost half a dozen medical colleges and hospitals have opened up in various parts of Nepal. These colleges and hospitals have a constant need for upgrading their testing and treatment facilities to make their services competitive. They therefore need to import modern medical equipment on a regular basis.

Resources: The Commercial Section of the U.S. Embassy posts such trade leads on the U.S. Embassy website: <http://kathmandu.usembassy.gov/> BuyUSA Nepal website: <http://www.buyusa.gov/nepal/en/>.

For information on trade leads, U.S. businesses may contact the Commercial Specialist of U.S. Embassy Kathmandu, Mr. Tapas Gupta, at: GuptaTK@state.gov.

NETHERLANDS (2007)

Overview: The domestic market in the Netherlands is relatively small. Imports plus local production far exceed domestic consumption requirements. The Netherlands, with its unique geographic position, functions as a distribution center, re-exporting an estimated 20% of imported medical equipment. Approximately 75% of the companies within this sector market their products outside the Netherlands.

There are many medical trading companies in the Netherlands, including four or five large ones. Industry estimates put the value of the annual market for medical equipment and supplies at around \$4 billion, of which equipment accounts for 75% of sales.

Suppliers in the medical equipment and supplies market serve approximately 220 general hospitals with 44,000 beds, eight university hospitals with 6,000 beds, 69 psychiatric hospitals with 18,750 beds, 15 rehabilitation hospitals with 825 beds, 3 epilepsy hospitals with 1,200 beds, and 16 outpatient hospitals. In addition, there are over 20,000 medical practices, polyclinics, laboratories, and consumers, accounting for 60% of sales. Hospital purchases contribute over 40% to the total medical equipment and supplies market, with the eight teaching hospitals accounting for the highest proportional share of these purchases.

There are more than 500 medical technology companies and over 35 specialized research centers operating in the development and manufacturing of medical instruments and systems, disposables, furniture, consumables, textiles, and supplies.

The Netherlands holds a strong position in exporting medical equipment because of the high quality and the specific nature of the equipment.

Major competitive factors are product performance, service and price. In the area of service, upgradeability is very important as is the belief that the company will be in business long term to provide ongoing service.

Reliable, detailed statistics for the entire sector are not available. The statistics below reflect the actual costs to the health insurance system for 16 medical supplies categories.

Best Products/Services:

- Magnetic Resonance Imaging (MRI)
- Position Emission Tomography (PET)
- Single Photon Emission Computer Tomography (SPECT)
- Optical Endoscopes
- Image Cytometry (microscopic cell measuring)
- Picture Archiving & Communication Systems (PACTS)
- Ultrasound Equipment
- Biosensors
- Defibrillators
- Electro-medical apparatus in general

Opportunities: The U.S. Mission to the European Union regularly reports major procurement opportunities in the medical sector that are open to U.S. companies:
http://www.buyusa.gov/europeanunion/eu_tenders.html

Resources:

- Ministry of Health, Welfare and Cultural Affairs
P.O. Box 20350
2500 EJ The Hague
The Netherlands
Phone: 31-70-3407911

Fax: 31-70-3407834
Internet homepage: www.minwvs.nl

- Ministry of Health, Welfare and Sport Health Inspectorate
Cluster Medical Technology
P.O. Box 16119
2500 BC The Hague
Phone: 31-70-3407436
Fax: 31-70-3407159

NEW ZEALAND (2007)

Overview: New Zealand's health system is comprised of public, private and voluntary sectors that combine and coordinate to provide and fund health care. More than 77.9% of health care is publicly (Government) funded. Private healthcare paid out over \$380 million in claims in 2005/2006.

The increased use of privately funded facilities provides additional opportunities for those exporting American medical products.

New Zealand's aging population will increase demand for facilities such as retirement villages with on-site hospitals that will require not only medical services but also medical equipment. Orthopedic and other muscular-skeletal conditions will become the major cause of disability.

The local market offers many opportunities for American manufacturers and service providers as approximately 50-60% of product in this sector is imported from the United States. It must be noted that regulations affecting medical devices and other therapeutic products could change significantly with the Australia New Zealand Therapeutic Products Authority.

(ANZTPA) regulatory body scheduled to come into effect at the end of 2007.

Best Products/Services:

- Ambulatory and rehabilitative care
- High technology diagnostic

Opportunities:

NZ Trade Shows Pharmacy Expo -
www.pharmacyexpo.co.nz
Auckland Showgrounds
June 2008

Resources:

- Australia New Zealand Therapeutic Products Authority www.tgamedsafe.org

- Medical Industry Association:
<http://www.mianz.co.nz>

- Medsafe www.medsafe.govt.nz

- New Zealand Statistics:
<http://www.stats.govt.nz>

NIGERIA (2006)

Overview: The Nigerian healthcare system has been described by renowned medical experts as a man-made disaster.

Nigeria developed a comprehensive healthcare policy which covered planned period from 1995 to 2005. Professor pat Utomi in his celebrated book –“Why Nations Are Poor” submitted that the implemented of the development was mainly in the breach. According to the policy document, “the goal of the National Health Policy shall be to establish a comprehensive healthcare system based on primary health care that is to promote of protective, preventive, restorative and rehabilitative, to every citizen of the country within the available resources so that individuals and communities are assured of

productive, social well being and enjoyment of living”. The Government of Nigeria is currently reforming the industry sector starting with introduction of a National Health Insurance in 2005. The government is trying to ameliorate current crisis situation in the national healthcare delivery services especially in rural communities.

Over the past several months, there have been several industrial actions related to a lack of basic needs and facilities in most of the public health institutions. Nigeria continues to import most of its medical equipment and pharmaceutical needs. Local production is limited to peripheral items such as hospital beds and gurneys.

Health care in Nigeria has been denied the critical attention due to it for several decades. Successive governments have neglected the primary, secondary and tertiary health services in spite of the volume of information available to them on the state of health care at all levels. Several policies have been formulated without a corresponding infusion of funds. The program has consisted mainly of lofty speeches and data that do not translate to better health service.

Nigeria claims that it is committed to the Millennium Development Goals but just as in former years, the health sector has remained almost stagnant and old facilities are collapsing. The vision of Health for All by the Year 2015, therefore, may not be realized as there has been very little visible improvement in this sector. Perhaps, the only visible program in the sector is the vigorous enforcement of regulation in food and drug administration by the leadership of the National Agency for Food and Drug

Administration and Control (NAFDAC). Nigeria continues to witness a massive import of food and drugs that have expired or are about to expire. Some of these imports come through the sea ports but large consignments reportedly are hauled over land through several porous borders routes.

However, the leadership of the National Agency for Food and Drug Administration and Control (NAFDAC) is reputed for courage, thoroughness and integrity. The war against counterfeits and fake drugs has not been easy due to several reasons including cultural factors which encourage patronage quacks.

Current Minister of Health, Professor Eytayo Lambo, is backing official pronouncements of GON's commitment to healthcare reforms at all levels across the country with visits to national university hospitals and other centers where facilities are being upgraded and new ones being installed. According to information from his ministry, while Primary Health Care remains a top priority of the federal government of Nigeria, and while secondary and tertiary health care services will be strengthened via effective and well coordinated referred systems, it will not be solely responsible for primary health.

Instead, GON will support the states in an effort to bring the primary health care services closer to the people, especially in rural communities. The GON also restated its commitment to the resuscitation of the health care delivery system through systematic funding and mobilization in line with the Bamako Initiative Program, a series of reforms in response to the deterioration of public health systems in developing countries.

Despite above pronouncements, it is unfortunate that the government's budget allocation to health continues to be less than 10% of the total national budget, which puts it far below the World Health Organization's minimum recommendation of 15% of the total annual allocation. Over the next 2 years, Nigeria plans to sustain reform efforts and to follow through the implementation of the National Health Insurance Scheme (NHIS), first proposed about 30 years ago. The scheme, widely accepted by industry experts and professionals is experiencing some teething problems.

The NHIS is aimed at generating resources for health care delivery as well as providing access to quality health care delivery. Other categories of healthcare services that have been given high priority include the intensification of non-curative components of primary health care like Sanitation Health Education, national preventive campaigns against childhood diseases and free compulsory immunization programs.

HIV/AIDS has been identified as a growing problem in Nigeria. The GON has expressed concern about this looming menace as it could have a devastating impact on Nigeria's growth and poverty alleviation efforts if it remains unchecked. Officially, the rate of HIV infection in Nigeria is about 5.8%. The Federal Government has established a Presidential Action Committee on AIDS (PACA), headed by the Vice President and key line ministers as members. It is estimated that the government would need about \$63,000,000 to combat Aids in Nigeria.

This would include substantial purchases of drugs and HIV/AIDS-related test kits.

Best Products/Services: Nigeria remains a major destination for global export of healthcare products and services.

There is still a high demand for medical services and equipment such as:

- Analytical and examination instruments
- Ultra sound scans
- Anesthesia equipment
- Mortuary and laboratory equipment.

In addition to public sector demands, the private sector accounts for much of Nigeria's imports and a significant percentage of informal exports to West African markets. As in the previous years, it is envisaged that refurbished and used medical equipment will remain in high demand, particularly in the private sector.

Opportunities: In Nigeria opportunities exist for professional training and environmental services in the healthcare sector. There is a dearth of specialist expertise in many specialized fields and a near absence of cutting-edge technology application in most healthcare institutions in Nigeria.

Resources:

<http://www.nigeriabusinessinfo.com/pharmaceutical-ops220702.htm>

Email Anayo Agu, Senior Commercial Specialist, U.S. Commercial Service, Lagos, Nigeria anayo.agu@mail.doc.gov

NORWAY (2007)

Overview: Norway spends more of its GDP on medical care than any other country with the exception of the United

States and Switzerland. This wealthy country's state-dominated system is striving for technological and organizational improvement in a climate of increasing demand and an aging population. U.S. medical equipment suppliers have attractive opportunities in Norway.

The health and social welfare system in Norway is predominantly publicly financed, mainly by a national insurance tax. The national insurance, or social security, is a collective insurance plan to which all in Norway belong. Citizens requiring medical treatment in Norway are guaranteed medical care and user fees are limited – no one pays more than \$150/year for public health services.

Estimates from the public health authorities and trade associations indicate that the total Norwegian market for medical and dental equipment and supplies reached just over \$1.4 billion in 2006. The various public health care authorities are estimated to account for about 90% of the purchases of medical equipment, whereas private (non-publicly funded) purchases account for the remaining 10%. About half of the medical equipment is sold to hospitals. The Norwegian Association of Medical Suppliers organizes over 100 of the agents and distributors of medical equipment and supplies in Norway, accounting for about 90% of the Norwegian market. The growth rate has been high for this sector over the last few years.

In January 2002, the Norwegian central government took over the responsibility for all the public hospitals from the local counties and placed them under the management of five, regional health

enterprises. Norway's 85 hospitals are now operated as health enterprises, wholly owned by the central government. There are five larger regional and 80 central/local somatic hospitals in Norway. The five regional hospitals are located in Oslo (2), Bergen, Trondheim, and Tromsø. All in all, about 350 institutions in the central government specialist services (including psychiatric institutions, the ambulance service, etc.) were transferred to the central government sector at the beginning of 2002.

Norway has 1-2 clinical facilities in each county, under the supervision of a regional or university hospital. Each regional hospital includes a medical, surgical and emergency section. In the larger regional hospitals one finds the more sophisticated and higher technology medical equipment. There are indications that the central government is considering a plan to make procurement of medical equipment and services a more centralized function of the five regional health enterprises, allowing for less procurement autonomy in each individual hospital or health enterprise.

The regional health enterprises run the state owned general hospitals, but also have agreements with private hospitals run by foundations. In addition, they buy services from private owned commercial hospitals. 6.5% of overall hospital stays in Norway take place in 25 smaller private somatic hospitals that have reimbursement agreements with the regional health enterprises.

These private clinics specialize in open heart surgery, hip surgery and minor surgical procedures such as arthroscopy

and sterilization, as well as inguinal hernia, cataracts and varicose vein operations in response to long waiting lists for such care in public hospitals. Competition is strong among these clinics and the best and most modern equipment and services will always be of interest.

There are also a handful of private clinics that do not have reimbursement agreements with the regional health enterprises. Since there are bottlenecks and waiting lists (often long) in the national health care system, there will always be a market for private medical clinics to provide services to individuals or groups who are able to "buy" themselves away from the waiting lists of the national health care system.

There are about 2,300 private practicing dentists in general dental clinics in Norway. In addition, there are about 280 private practitioners with dental specialties and about 300 dental technicians in Norway. The Public Dental Health Service employs about 1,000 dentists. In Norway, private practitioners mainly provide dental care for adults. They obtain their income from fees paid by their patients. People 20 years and older pay nearly all their own costs for dental care. There is no subsidy program for adults. Until 1995, there was a fixed fee schedule for dental care. The fee schedule was then abandoned, and market forces have since determined fees. The number of group dental practices in Norway is expected to increase, primarily due to the trend toward private practitioners wanting more flexible work arrangements.

Best Products/Services: The most promising sub-sectors for U.S. suppliers of medical equipment include:

- Surgical instruments and equipment
- Diagnostic apparatus
- Orthopedic equipment
- Monitoring instruments and equipment
- Laboratory/pathology instruments and equipment
- Digital x-ray systems
- Customized ICT equipment.

Telemedicine is seen as an important part of future acute medical care. Within telemedicine, the GON expects significant potential for radiology (e.g. work-sharing among hospitals); specialist consultations within the ear-nose-throat field (e.g. video conferencing); specialist consultations in dermatology (e.g. video conferencing and still picture technology); and cardiography (e.g. heart rhythm/sound comparisons). Internet access and cell phone density in Norway ranks among the highest in the world. For a small population with remote settlements, telemedicine presents a real opportunity to provide better services at lower costs. Norway has come relatively far in developing and utilizing statistics and medical data, and continued efforts are expected along these lines. The same can be said about the development of information technology to support these activities.

Demographically, Norway is growing older. In particular, the oldest segment of the population is expanding; this represents an extra burden for the healthcare system. The government has signaled that nursing and care for the aged must be given higher priority.

Indications are that there will be growing opportunities for private initiatives in these areas. Around 40% of population aged 67 and above require and receive help in the home, while 8.0% live in a nursing home. Social security also provides dysfunctional persons with support for medical expenses, practical help and care at home, the acquisition of mobility and other aids, and if necessary, even specially-equipped cars.

Best sales prospects for U.S. dental suppliers in Norway include general dental, surgical and laboratory supplies and materials, and advanced technical and electronic equipment, such as digital x-ray systems.

High-quality and technically advanced products, competitive prices, and a tailored marketing approach are critical for U.S. companies wishing to penetrate the mature Norwegian market. An attractive and functional design is also very important in the Nordic countries.

It is highly recommended to have a Norwegian agent/distributor and/or representatives who can give advice and service the equipment, locally. It is increasingly difficult for a U.S. manufacturer to sell directly from the U.S. to an end-user. Finding a local representative with close established contacts with the public authorities and established customers is the key to success for U.S. companies new to the market.

Equipment to be sold in Norway should have good references from established users and be registered with the Department of Health and Care Services. In addition, the product must have EU approval (CE Mark). Norway is a full

member of EFTA (European Free Trade Association), and participates in the EU internal market through the EEA Agreement (European Economic Area). Norway has the same rights and obligations as EU member states in regulation of medical devices. Norway applies EU product requirements, methods of conformity assessment, and duty rates for U.S. imports.

Opportunities: Norway spends more than \$7.0 billion annually on its hospitals. Based on reports from the Norwegian Ministry of Health and Care Services there have been development projects on the table for new investments totaling \$4.5 billion in the Norwegian health sector for the 10-year period leading up to 2010. The most notable of these development projects are a new regional hospital in Trondheim, a new central hospital for Akershus county, and a new hospital in Ostfold county. These types of investments always depend on the national budget situation and may be subject to revision and cost cutting in several areas.

Resources:

- Norwegian Ministry of Health and Care Services
<http://www.regjeringen.no/en/ministries/hod.html?id=421>
- Norwegian Directorate of Health and Social Affairs
<http://www.shdir.no>
- Norwegian Board of Health
<http://www.helsetilsynet.no>
- Eastern Norway Regional Health Enterprise (Helse Øst RHF)
www.helse-ost.no
- Southern Norway Regional Health Enterprise (Helse Sør RHF)
www.helse-sor.no

- Central Norway Regional Health Enterprise (Helse Midt-Norge RHF)
www.helse-midt.no
- Western Norway Regional Health Enterprise (Helse Vest RHF)
www.helse-vest.no
- Northern Norway Regional Health Enterprise (Helse Nord RHF)
www.helse-nord.no
- Norwegian Association of Medical Suppliers <http://www.lfh.no>
- Norwegian Laboratory Suppliers Association (NLF) www.nlf-lab.no
- National Insurance Administration
<http://www.trygdeetaten.no>
- Norwegian Medical Association
<http://www.legeforeningen.no>

PHILIPPINES (2007)

Overview: The medical equipment sector presents good opportunities for U.S. firms. Total imports increased by 32% from \$90 million in 2004 to \$119 million in 2005. The medical industry in the Philippines is almost totally dependent on imports. While demand decreased 7% in 2004 due to a depreciated peso, the market rebounded in 2005 with a 32% growth. Additional requirements for medical services, new technology, and equipment replacement spurred market growth.

The growth of medical tourism in the Philippines offers many good opportunities for U.S. sellers of medical equipment and instruments. Medical tourism is a fast growing industry in the region, and many countries, including the Philippines, are actively promoting it.

In 2005, the Philippines' total imports of medical equipment were \$119 million. The U.S. had a commanding 34%

market share, followed by Singapore with 12%. Industry sources reveal that a substantial volume of Singaporean exports actually originate in the U.S., a fact which is not reflected in the official data.

The Philippines has 1,723 hospitals with more than 85,000 bed capacity. The Philippine Department of Health administers 72 hospitals all over the country. The Armed Forces of the Philippines administers 31 infirmaries, while the other 559 government hospitals are managed and supervised by the Red Cross and its Chapters and the provincial, municipal, or city governments under the Department of the Interior and Local Governments (DILG).

The Philippine medical market is partial to American products. U.S.-trained Filipino doctors prefer the high-technology of American medical equipment and instruments, which justify their higher costs. American brands face Singaporean, German and Japanese competition.

Best Products/Services: The most promising sub-sectors are:

- Electro-medical equipment
- Ultrasonic scanning machines
- X-ray and radiation equipment
- Dialysis instruments and apparatus
- Medical and surgical instruments.

Opportunities: Several hospitals within and outside Metro Manila are improving facilities and adapting new technologies to address demand from foreigners and returning residents who avail themselves of healthcare services in the Philippines.

The government's Medical Tourism Program does not offer assistance in terms of technology; however, it helps promote the services to prospective clients outside the Philippines. Industry sources expect a modest growth of 5% in imports and exports of Medical Equipment in the next three years, as many hospitals have only recently acquired equipment to upgrade their facilities.

Resources:

- Department of Health:
<http://www.doh.gov.ph>

- National Statistics Office:
<http://www.census.gov.ph>

- Philippine Medical Tourism Program:
<http://www.philippinemedicaltourism.info>

- Dey Robles, Commercial Specialist
U.S. Commercial Service Manila
Email: Dey.Robles@mail.doc.gov,
Manila.Office.Box@mail.doc.gov

PORTUGAL (2007)

Overview: There is EU harmonized legislation governing the importation of medical devices in Europe. As in other EU countries, it is required that medical devices imported from third countries being sold in Portugal undergo an analysis test by an accredited entity in the EU. If devices pass this test, they are marked "CE" and may then move freely and be sold in all countries throughout the EU.

Best Products/Services: In 2005 the U.S. was the third largest supplier to Portugal of HC 9022 which covers X-Ray Apparatus; Tubes, Panels, Screen and related equipment. Germany and

Spain were the largest suppliers respectively.

The following products represent U.S. exports to Portugal:

- 9002 Optical Elements, Mounted; Parts & Accessories
- 9018 Medical, Surgical, Dental or Vet Inst, No Elec, Pt
- 9019 Mech-Ther, Massage, Psych Test, Ozone App Etc, Pts
- 9020 Breathing Appliances & Gas Masks Nesoi; Parts Etc
- 9021 Orthopedic Appl; Artif Body Pts; Hear Aid; Pts Etc
- 9022 X-Ray Etc Apparatus; Tubes, Panels, Screen Etc, Pt
- 9025 Hydrometers, Thermometers, Pyrometers Etc; Pts Etc
- 9027 Inst Etc For Physical Etc Anal Etc; Microtome; Pts

Opportunities: The Portuguese economy experienced a difficult period. Despite the implementation of restructuring programs, the health care sector continues to be a priority. Reform under the Portuguese government is set to concentrate on opening the health sector to increased private initiative and markedly reducing public expenditure. During the past five years new hospitals were built and existing ones renovated. New hospitals will continue to be built and existing ones will be upgraded and renovated until all European Union standards and requirements are met. The total investment for these hospitals is expected to be around 600 million Euros. Financing will be granted by partnerships of private and public entities and international public bids for the construction will continue during 2006 and 2007.

The Portuguese market for medical equipment, instruments and supplies grows with the continuous demand for innovative instruments and apparatus. Public hospitals are the principal end-users of medical equipment in Portugal, accounting for around 80% of the total market. The Directorate General for Hospital Construction issues tenders for equipment required for new hospitals. Public hospitals tend to be relatively slow payers, taking an average of eight to nine months to settle bills. Hospitals in the private sector normally use the direct sales method and payment delays rarely occur. The appointment of a local agent for the Portuguese market is essential. Although the U.S. is not the number one supplier to Portugal, it continues to be perceived as a preferential supplier of dependable top quality products.

As the health care sector upgrades during the next three years, the Portuguese market for medical equipment, instruments and supplies is expected to grow at a steady rate of 7%.

Portugal has still not yet met all standard requirements imposed by the EU. The massive infusion of EU structural funds has promoted faster economic growth in this sector compared to other sectors and compared to other EU countries. The continuing construction of new hospitals and renovation and upgrading of existing ones has created an extraordinary market demand for all types of medical equipment.

Resources:

- INE-Instituto Nacional de Estatística: <http://www.ine.pt>
- ICEP-Instituto do Comercio Externo de Portugal: <http://www.icep.pt>

- 2007 Worldwide Medical Equipment & Supplies Manufacturing Industry Report can be obtained from Market Research.com:

<http://www.marketresearch.com/product/display.asp?productid=1432591&xs=r&SID=25235679-376320124-401547427&curr=USD&kw=&view=sta>

-“The Medical Device Market: Portugal” is available from Piribo:

http://www.piribo.com/publications/country/europe_west/portugal/medical_device_market_portugal.html

QATAR (2007)

Overview: The U.S. is one of the leading exporters of medical equipment, medical supplies, medicines and pharmaceuticals to Qatar. With more Qatari medical staff receiving training in the U.S. and the establishment of Weill-Cornell Medical School in Qatar, there is increasing interest in importing medical equipment and supplies from the U.S.

There are three new hospitals under construction and an increasing need for all types of medical equipment and supplies, trained staff and further training for staff. U.S. firms wishing to invest in the health sector in Qatar should note that Qatar’s Law No. 13 of the year 2000 allows 100% foreign investment in the health sector, pending approval from the government.

Best Products/Services:

- Medical Equipment
- Medical Supplies
- Equipment and supplies for persons with special needs

Opportunities: *Hamad Medical City:* Scope: 300-550 beds, Value: USD 600 million; Client: Public Works Authority

Resources:

- [Central Tenders Committee](#)
- [Hamad Medical Corporation](#)
- Private opportunities:

Contact the commercial section of the United States Embassy in Doha through: <http://www.buyusa.gov/qatar/>

RUSSIA (2005)

Overview: Russia’s healthcare system is evolving rapidly and represents many promising areas for medical equipment exports. It is currently estimated that only one fifth of the Russian population of 144.2 million has access to quality healthcare. Despite this, Russia’s healthcare network is enormous and includes 9,663 in-patient hospitals, 16,615 outpatient polyclinics, and 3,252 emergency stations.

Further, Russia has 608,588 doctors and 1,388,349 paramedics. The majority of hospitals and polyclinics are public and belong to federal, regional or local governments. There is also a significant number of so-called agency healthcare establishments to serve specific large governmental entities such as the Ministry of Transportation, Ministry of Economic Development and Trade, Ministry of Defense, etc. While there is strong growth in the number and size of private clinics, they currently occupy only 3% of the market and most are specialized in the areas of dental, eye, and cosmetology clinics.

A significant portion of the medical equipment and devices used in public clinics and hospitals is obsolete and needs replacement. Russia does not produce many types of high-end medical equipment and relies exclusively on imports of such equipment. While

the resulting opportunities in the market are vast, financing remains insufficient to address the needs of the medical industry. Total public healthcare spending in Russia at all levels comprises only 4.1% of the GDP in comparison to 9-11% in developed countries. The average Russian citizen's out-of-pocket expenses for pharmaceuticals, medical devices and services are equally low.

During the past three years, the Russian medical equipment and devices market has shown substantial and steady growth with annual growth rates exceeding 10%. The total volume of the market in 2005 is estimated at \$1.8 billion. Imports have played a significant role accounting for approximate 70-75% of the total market.

The top five foreign suppliers to the Russian healthcare market are Germany (46%), United States (24%), Japan (9%), Italy (5%), and France (5%). Some 90% of Russia's domestic production of medical equipment and devices are manufactured at 660 enterprises having federal licenses for the production of medical equipment and devices, including 220 plants which are primarily dedicated to the defense industry.

The Ministry of Health has approved over 20,000 medical products and devices for use in treatment but only 12,000 of those are represented among the list of locally made products.

However, Russian medical equipment manufacturers are making progress in several traditional and developing segments of medical equipment manufacturing, such as electrocardiographs, patient monitors, X-

Ray and fluorography devices, anesthesia, sterilization and pulmonary equipment, ultrasound scanners, devices and instruments for endoscopies and laparoscopy, and electrosurgical instruments. Stronger domestic positions were also achieved in emergency vehicles, operating lighting systems, surgical instruments, home healthcare products, orthopedic devices, ophthalmic products, test kits, polymeric and glass medical products, disposable syringes, IV solutions and sets and other disposables in 2005.

Best Products/Services: Despite recent breakthroughs and the fact that locally made medical equipment is 2-4 times less expensive than their imported competition, Russian production still lags behind the majority of developed countries. Thus, Russia is still dependent on imports from a number of countries in a significant number of medical equipment industry sub-sectors, especially those requiring significant investments in R&D, innovative technologies, and automation.

The best prospects for medical equipment include:

- Modern computerized diagnostic equipment
- Computer and X-Ray tomography, angiography systems
- Resuscitation and functional diagnostic equipment
- Implants and prostheses
- Surgical and endoscopic equipment, headlights for surgeons
- Robotics clinical laboratory systems for express microanalysis
- Telemedicine complexes
- Hospital equipment and supplies
- Operational room equipment

- Artificial kidney complex components (oxigenerators and dialyzers),
- Hospital beds
- Advanced home healthcare equipment and supplies
- Significant amounts of medical supplies and disposables; including polymeric packaging for IV solutions.

Opportunities: Recent reforms in healthcare have created opportunities for U.S. medical equipment suppliers. In November 2005, President Putin announced that healthcare is one of the four key national projects, along with education, housing and agriculture.

One important promising development is the growth of healthcare funding through massive federal investments and the development of health insurance systems.

At the moment, the two major state sources of healthcare funding—mandatory insurance funds (30% of total funding), and spending supported by federal and regional budgets (70%) – do not completely cover all healthcare expenses. Private healthcare insurance programs’ coverage is approximately 5% of the population.

According to the long-term reform plans, mandatory insurance funds will serve as the main source of healthcare funding, providing transparency and control over cash flow within the system. There is also some discussion about shifting to private insurance plans in the long term.

The first reform of healthcare funding, introduced on January 1, 2005 was the implementation of a “monetization of health benefits” for certain categories of the Russian population, mainly the

disabled and elderly. This program is currently represented by the acronym “DLO” which translates as Additional Drug Provision. Another commonly used name for it is LOL (Subsidized Drug Provision), which is actually a first attempt to establish a system of insured drugs.

Other recent fiscal improvements are strengthening the primary care system through wage increases for district physicians and paramedics, massive support for vitally important diseases such as AIDS, tuberculosis and diabetes, increased funding for certain high-end surgeries and re-equipping 10,000 primary care municipal clinics with new medical equipment and a quadrupling of expenditures for high-end medical treatments.

Recently, the Russian government announced that it plans to spend approx. \$1.1 billion in the near future to buy medical equipment for 11,000 medical establishments.

Resources:

- Ministry of Health and Social Development official web site www.minzdravrf.ru
- Federal State Enterprise Scientific Center for Testing Medical Products www.regmed.ru
- Center for Sanitary and Epidemiological Norm-setting , Hygienic Certification and Expertise of the Ministry of Health and Social Development www.crc.ru
- Research, Marketing, Business, Consulting, a consulting and market research company specializing in the pharmaceutical market www.rmbc.ru
- Consulting firm, Pharmedinform, specializing in assistance with

registration and certification of medical equipment and pharmaceuticals.
www.pharminform.ru

SAUDI ARABIA (2007)

Overview: The new 2007 government budget revealed the Kingdom's leading position as the region's largest market for medical products and services. Healthcare expenditures in 2007 are projected at \$10.53 billion, more than 10% of Saudi GDP and placing Saudi Arabia as one of the world's largest per capita total expenditures on health.

The Ministry of Health (MOH) is the largest provider of healthcare services and the largest customer for medical products and services. As of 2005, the MOH had 213 hospitals with 30,020 beds, representing close to 60 percent of the market. In its pursuit to expand healthcare coverage, the MOH built 40 new hospitals in 2004-2005 at a total cost of \$507 million. Likewise, the MOH has already signed contracts for an additional 1,010 primary healthcare centers (PHC), bringing the total to more than 3,000 PHCs. The Saudi private sector comes in second place, accounting for more than 30% of healthcare facilities, while other government entities represent the balance.

Best Products/Services: Being the largest provider, the Ministry of Health hospitals present innumerable opportunities for hospital maintenance, cleaning, catering, laundry services, infrastructure development and refurbishment. Despite competition from government hospitals, private investment in health services remains very attractive, especially in major urban

centers, given bed dependency ratio in these regions, which exceeds the national average. This suggests that the Saudi healthcare sector should at the very least grow an average of six new hospitals (average 200 beds per hospital) per year to keep pace with the population growth.

Another potential area for development will be in establishing medical training institutes to enhance technical education, especially for paramedical opportunities and bridge the gap between supply and demand for qualified medical personnel. Annually, government entities including the MOH issue tenders for medical equipment and services. These tenders are posted at different intervals throughout the year and include hospital equipment and disposables, pharmaceuticals, and laboratory equipment and disposables. In addition, the MOH tenders out standard yearly bids for equipment refurbishment and maintenance. One of the most sought after market is the annual Gulf Cooperation Health Ministers' Council Tender. The Executive Council for the GCC Health Ministers' Council issues five tenders, namely, for pharmaceuticals, hospital disposable products, medical laboratory items, blood bank, orthopedic and implants, and chemicals.

In addition and annually, each government entity puts out a list of needed equipment and instruments for their hospitals. Equipment and parts for diagnostic imaging, kidney and heart transplants operations, dialysis equipment and parts, pulmonary diseases, intensive care unit, emergency and traumatic care, ambulatory care,

pediatric and neonatal care, cancer and leukemia therapy are among some of the equipment regularly upgraded and/or replaced.

Opportunities: Saudi Arabia ranks as the 22nd country in the world in healthcare expenditures. During 2007, the Saudi MOH plans to build 380 primary healthcare centers, and 13 new hospitals. The MOH has already signed a contract valued at \$30 million to set up the National Health Laboratory in Riyadh.

The MOH plans will enhance the hospitals' bed capacity from an existing 30,020 beds to 55,000 beds by 2010. In order to achieve this growth, the MOH is expected to invest an average of \$1.2 billion annually on projects alone.

In addition to the above projects, the annual Gulf Cooperation Health Ministers' Council Tender joint purchase agreement amounted to \$665 million in 2006, 12% more than in 2005. The bid included pharmaceuticals, vaccines, hospital and laboratory disposables, medical rehabilitation, blood transfusion, oral hygiene and dental products, and chemicals.

Resources:

- Ministry of Health Ministry of Defense and Aviation
- Ministry of Interior Medical Services
- Saudi Arabian National Guard Health Affairs
- General Organization for Social Insurance hospitals
- International Medical Center
- Dr.Suleiman Al-Habib Medical Center
- Saad Specialist Hospital
- Almana General Hospital

SERBIA & MONTENEGRO (2007)

Overview: Public expenditure for healthcare is low and amounted to 3% of GDP in 2006. Serbian government has committed to improving and modernizing their nationalized healthcare systems, which everyone agreed are in desperate need of reform. Equipment upgrades are part of the goal. According to the National Investment Plan adopted in June 2006, around \$300 million will be spent in this sector within the next two years.

The market for medical equipment, which has been growing steadily, is dominated by imports because there is almost no domestic production of medical equipment.

Exporters to Serbia in this field are: Germany, United States, Italy, Austria, Great Britain, Japan and Switzerland. American medical products make up approximately 10% of the sector's total expenditures, but competition is strong with European countries, some of which have been in the market for a long time.

The Ministries of Health in Serbia is the major player in the Serbian medical equipment market. The Ministry develops health policy establishing fundamental objectives for health care, proposes the health care budget and the investment program for the sector, and monitors the work of state-owned health institutions. Equipment purchases and other major investments are financed from the government's budget. The Act on Public Procurement requires open tenders for all purchases of goods and services exceeding a certain amount. Currently most purchases are publicly owned institutions, but private practices

in medical sector created some space for sale of equipment for e.g. dialysis, diagnostic imaging, etc.

Institute of Health Insurance in Serbia administers healthcare systems which are based on compulsory payroll contributions from both employers and employees. Serbia has opted to retain a predominantly publicly-funded health system, with an increasing degree of private service provision.

The Health Ministry in Serbia has embarked on a program of reform in the health care system in an attempt to modernize it and bring it closer to Western standards. These ongoing and future reforms offer U.S. medical device manufacturers opportunities to increase their market share in Serbia.

Best Products/Services: U.S. manufactured medical equipment enjoys an excellent reputation in SAM for its state-of-the-art technology, quality and reliability. However, medical equipment importers and specialists emphasize the real and perceived lack of technical assistance and service support as one of the main obstacles to further growth of US imports on the market. One should also take into account that the SAM market for medical equipment is still very price sensitive because of limited resources.

Best sales prospects for U.S. medical equipment are expected to be:

- Cardiovascular diagnostic equipment
- Non-invasive surgical devices
- Anesthesia and intensive care equipment
- Diagnostic imaging (CTs, MEIs)
- Radiation therapy equipment
- Ultrasound equipment
- Urology equipment
- Laboratory and testing equipment

- Tissue and blood bank related equipment
- Hospital care equipment
- Hospital information systems

U.S. company Medtronic already has a leading position in sale of cardiovascular diagnostic equipment, pacemakers and stents with exports of \$10 million in 2005. GE Healthcare products are well known on the market and have good prospects for sale in the future, however needs to intensify its presence on the market.

Local distributors of medical products and equipment claim that there is a large demand for diagnostic tests for drugs, pregnancy and various illnesses. Local distributors also expressed willingness to import what they refer to as “hit” products, new US products for which equivalents do not exist in Europe.

“New-ness” of the products is very important for the SAM market that is otherwise very price-sensitive: if the main competitors do not have such products, local distributors are willing to accept the relatively higher prices of American products.

Opportunities: There are good opportunities in the SAM market for US manufacturers of sophisticated diagnostic equipment such as:

- Electrocardiographs
- Endoscopes
- Scanners
- Computer imaging equipment
- Pace makers
- Digitalized x-ray equipment
- Nuclear medical instruments
- Clinical laboratory equipment.

The Ministry of Health is also looking for innovative ways to work with

medical equipment suppliers. They are considering the option of public-private partnerships in which a company would equip and administer a certain medical center or hospital unit.

At this early phase of this project the Ministry is willing to listen to different proposals. Having in mind the current state of medical equipment in SAM, hospitals suggest that several sub-sectors will be especially prominent in the near future.

Therefore the highest opportunities for the coming years are expected to be in the following medical equipment sectors:

- Health informatics equipment
- Home health care and rehabilitation equipment
- Pathology equipment and services
- Diagnostic imaging equipment, especially ultrasonic diagnostic equipment
- Patient monitoring systems including intensive care units
- Dialysis equipment
- Day hospital and day surgery concepts

Medium and long-term procurements will be made for information systems developed for the National Health Insurance Fund, as well as training, public information and technical assistance, and support for outpatient and inpatient care. Hospitals perform regular procurements of diagnostic equipment, modern patient monitoring systems and hospital management systems.

Resources:

- Ministry of Health and Social Welfare of Serbia: www.zdravlje.sr.gov.yu

- Health Fund of the Republic of Serbia: www.rzzo.sr.gov.yu
- Velefarm: www.velefarm.co.yu

For more information on market entry strategies contact:

zorica.mihajlovic@mail.doc.gov

SLOVAKIA (2007)

Overview: Slovak production has stagnated and most equipment is imported. New entrants will face strong competition from the same international competitors they see elsewhere.

Best Products/Services:

- Instruments and appliances used in medical, surgical, dental or veterinary sciences, including scintigraphic apparatus, other electro-medical apparatus, and sight-testing instruments
- Orthopedic appliances, including crutches, surgical belts and trusses; splints and other fracture appliances; artificial parts of the body; hearing aids and other appliances which are worn or carried or implanted in the body to compensate for a defect or disability.
- Instruments and apparatus for physical or chemical analysis (for example, polarimeters, refractometers, spectrometers, gas or smoke analysis apparatus); instruments and apparatus for measuring or checking viscosity, porosity, expansion, surface tension or the like; instruments and apparatus for measuring or checking quantities of heat, sound or light (including exposure meters); microtomes.
- Oscilloscopes, spectrum analyzers and other instruments and apparatus for measuring or checking electrical

quantities, excluding meters of heading HS 9028; instruments and apparatus for measuring or detecting alpha, beta, gamma, and X radiation, as well as cosmic or other ionizing radiations.

- Apparatus based on the use of X-rays or of alpha, beta or gamma radiation, whether or not for medical, surgical, dental or veterinary uses, including radiography or radiotherapy apparatus, X-ray tubes and other X-ray generators, high tension generators, control panels and desks, screens, examination or treatment tables, chairs and the like.

- Instruments and apparatus for measuring or checking the flow, level, pressure or other variables of liquids or gases (for example, flow meters, level gauges, manometers, heat meters), excluding instruments and apparatus of headings HS 9014, 9015, 9028 or 9032.

Opportunities: Most opportunities are in the Industrial Production and Healthcare Services. The fastest growing sector is automotive production. A number large of automotive suppliers opened their facilities in Slovakia and they need measuring and testing equipment.

The healthcare sector has been undergoing privatization and thus the most private healthcare centers are investing massive financial volumes into new healthcare equipment.

Resources:

- Slovak Statistical Office
www.statistics.sk
- International Trade Administration
www.ita.doc.gov
- The National Bank of Slovakia
www.nbs.sk

- The Ministry of Healthcare
www.health.gov.sk
- The Ministry of Economy
www.economy.gov.sk

SLOVENIA (2007)

Overview: Slovenia's health care equipment market is dominated by imports because there is limited domestic production. In 2004, the approximate market size was \$150 million. Exports to Slovenia mainly come from Germany, Italy, Austria, the United States and Switzerland.

The market has seen some growth over the last ten years, but the real potential lies ahead. The vast majority of equipment in public hospitals is outdated, and is expensive to maintain.

The government has announced plans to restructure the healthcare sector, most likely through public-private partnerships, and there will likely be increased demand for innovative instruments and equipment.

The Ministry of Health is the main player in the Slovenian medical equipment market. The Ministry develops health policy, proposes the health care budget and the investment program for the sector, and monitors the work of state-owned health institutions. Due to fiscal problems with the national health account, the Ministry was forced to check purchasing programs and decided to centralize hospital tenders. These new measures have begun to show some results, mainly with increased transparency of public procurement. Dental services are mainly in private hands.

The Slovenian market is very price-sensitive. Institutions are, however prepared to pay well for state-of-the-art equipment.

SOUTH AFRICA (2007)

Overview: South Africa's healthcare sector serves approximately forty-four million people. Of these, about 7.5 million people enjoy world-class private healthcare facilities and medical aid schemes, but the remaining population has access to only the government subsidized public health care system, which is under severe strain. Overall, healthcare spending in South Africa constitutes around \$16 billion, or 8% of GDP, with 50% of total spending by private healthcare.

Best Products/Services:

According to trade statistics, the following products have the highest importation:

- Medical/surgical instruments and appliances
- Medical needles and catheters
- Electro-diagnostic apparatus
- Ultra scanning apparatus
- Imaging equipment
- Patient care monitors

Analysts expect these import trends to continue over the next two years.

Opportunities: Both sectors remain price-driven; hence cost-effective products will be in greater demand; particularly for primary health care, with emphasis on reliable, low maintenance products and a growing interest in high-tech, non-invasive equipment. Preventive healthcare is also of increasing interest.

Government, which spends around 40% of the public healthcare budget, will continue to focus on upgrading public hospital and clinic facilities.

Resources:

- South African Department of Health: www.doh.gov.za
- South African Medical Devices Association: www.samed.co.za
- The Dental Association of South Africa: www.sadanet.co.za

U.S. Commercial Service Felicity Nagel, Commercial Specialist – Medical
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Email: Felicity.Nagel@mail.doc.gov,
Tyrena.Holley@mail.doc.gov.
Website: www.ussatrade.co.za

SOUTH KOREA (2006)

Overview: One of the largest Asian markets for medical devices, the Korean market was valued at \$2 billion in 2004 and is expected to increase to approximately \$2.2 billion in 2005. According to industry sources, the medical equipment market is forecast to grow at an average annual rate of 10-15% over the next few years.

However, one important factor that may slow the growth rate will be the measures that the Korean government decides to adopt to deal with the increasingly expensive national healthcare insurance system. Korea depends on advanced medical devices from the U.S., Japan, and the EU to supply about 65% of total market demand. In 2005, total imports of

medical devices were estimated at \$1.4 billion, with U.S. imports, estimated to be \$491 million, representing a 34% import market share. Market demand for advanced and innovative medical devices is forecast to remain strong in 2005 and over the next several years as Korea's hospitals continue to purchase advanced technology products from abroad and as increasing numbers of elderly Korean patients require sophisticated medical procedures.

In general, Koreans are increasingly demanding better care from their national healthcare system as the standard of living continues to improve in the world's eleventh largest economy.

Another factor favoring the use of imported advanced medical equipment and devices is the growing number of Korean doctors educated in the U.S. and Europe.

Best Products/Services:

- Artificial joints
- Magnetic resonance diagnostic devices
- Cardiovascular instruments
- Radiological devices
- In-vitro Diagnostic products
- Dental implants and supplies
- Surgical apparatus (laser and electric)
- Catheters
- Ophthalmic equipment
- Laser instruments

Opportunities: The Korean government is in the process of establishing world-class hospitals with 600-800 beds in the Incheon Free Economic Zone (FEZ). According to the passage of the Act on Designation and Management of Foreign Economic Zones on Dec. 31, 2004, which will take effect on April 1, 2005, one or two foreign hospitals will be

established in the Incheon FEZ, with the first hospital targeted to open in 2008.

Since this is the first time that Korea has invited foreign capital participation in healthcare (moreover outside of the national healthcare system), the development of the Incheon FEZ provides a good export opportunity for U.S. suppliers of high-end medical equipment and devices.

Resources:

- Ministry of Health and Welfare
www.mohw.go.kr
- Korea Food & Drug Administration
www.kfda.go.kr
- Health Insurance Review Agency
www.hira.or.kr

Local Contact

(Ms.) Yoon-Shil Chay
Commercial Specialist
Commercial Service Korea
U.S. Embassy
32 Sejong-ro Jongro-gu
Seoul 110-710 Korea
Tel: 82-2-397-4439
Fax: 82-2-737-5357
Email: yun.shil.chay@mail.doc.gov
Website: www.buyusa.gov/korea

SPAIN (2007)

Overview: The market for medical equipment depends heavily on imports, which represent approximately 89% of the total market.

U.S. medical equipment is highly regarded by Spanish medical professionals and domestic importers/distributors. The United States is the main supplier to Spain with approximately 36% of total imports. The public healthcare institutions are the

main purchaser of medical equipment, accounting for approximately 90% of the market.

The private health care sector comprises the remaining 10%. Public hospital tenders make most public healthcare sector purchases. However, pre-selection among competing companies is a step made prior to the open bid. During this pre-selection period, the supplying companies present to the hospital the description of their products and their prices. After reviewing the proposals, the hospital authorizes the final selection and chooses a few companies that are considered to be most suitable. The final purchase decision is made from these selections. In the private sector, tenders are not used. Normally, private hospitals select a small number of suppliers from whom they make direct purchases.

Because of these procedures, foreign and U.S. companies are encouraged to have either a Spanish distributor or their own branch in Spain. Some regional governments are starting a new procurement procedure, which consists on purchasing the basic (heavy) diagnostic and therapeutic equipment for new hospitals and renewal of older ones based on lease terms for which they pay an annual fee for a given numbers of years, with the supplier obliged to update the equipment. IT services for those new facilities will also follow the same pattern.

Only a few large companies are selected for these processes, which include some U.S. multinational companies. This new procurement procedure may increase U.S. market share in the coming years.

Spain imports only new equipment. The import of refurbished medical equipment into Spain is permitted, but both the public and private medical providers in Spain are only interested in new equipment. There is zero duty on medical devices. U.S. products that are competitive, new or innovative in the U.S. market have significant chance of success in Spain.

Spain is a free market economy whose business practices are similar to the U.S. and other EU countries. A requirement for all tenders is that the medical devices have the CE Mark. This mark became compulsory in June 1998. This requirement stipulates that many products previously registered in Spain when the CE Mark was nonexistent now need to be reregistered following the new EU Directive. The registration can be done in any EU0 country, including Spain. The registration process has been reduced from 12-14 months to 6-8 months.

As a consequence of the development of the EU market and the implementation of the CE Mark, many U.S. companies have been centralizing their manufacturing and import operations into one single country from which they register and distribute their products to the rest of the EU.

The market for medical products is expected to grow at an average of 15% over the next three years. The domestic industry is growing but only to keep pace with the growing demand. Consequently, domestic suppliers' share of the market is stagnant.

Best Products/Service:

- Innovative and efficient cardiology
- Respiratory/anesthesia
- Neurology
- Orthopedics
- MRA
- ETP
- Dermatology

Wound treatment products and disposables are very much sought by Spanish importers and end users.

Opportunities: There is an excellent opportunity for Automatic External Defibrillators (AED) in Spain.

Legislation is currently being enacted requiring the installation of AED in many public places, airports, stadiums, railroad stations, trains, public buildings, airplanes, etc., which will generate demand for AEDs in the immediate future. This legislation also calls for broad training in the use of AEDs. U.S. AED defibrillator companies have an excellent opportunity in the Spanish market.

Large or specialized U.S. companies may benefit from the new procurement procedures for basic diagnostic and therapeutic procedures that some regional governments are initiating. Demand for IT medical systems and telemedicine equipment is also expected to increase with the adoption of new and renovated hospitals of new updated systems to facilitate clinical and patient control and administrative procedures and help improving overall efficiency.

Resources:

- The Guia Puntex: importers, exporters and manufacturers of medical devices:
www.puntex.es

- Association: The Spanish Federation of Manufacturers, Exporters and Importers of medical devices (FENIN):
www.fenin.com

- Commercial Service Spain:
www.buyusa.gov/spain
Trade Specialist, Medical Sector:
Jose Ramon Posada,
jose.posada@mail.doc.gov

SRI LANKA (2007)

Overview: Total government expenditure on health in 2005 was 1.9 % of GDP and amounted to approximately \$350 million. Although the government plays a major role in the country's health care system, maintaining public sector health systems has become a challenge due to inadequate funds. The deterioration in some aspects of public sector health services has to a certain extent been reversed by private sector investments, mainly in curative health care.

Private sector expenditure in health care has exceeded that of the public sector and has been estimated around 55% of total health care expenditure in the country. There are nearly 200 private hospitals and nursing homes of varying sizes, 5000 private pharmacies, and 1000 laboratories in Sri Lanka. Demand for health care services is bound to rise in the future due to a rapidly ageing population. The refurbishing and upgrading of hospitals with the latest medical equipment provides medical equipment manufacturers in the U.S. opportunities for supplying into Sri Lanka.

Engaging local representatives with experience in the medical sector and maintaining good connections to both public and private sector health providers are important for medical equipment suppliers to succeed. Well-known international brands are also important in succeeding in this sector.

Best Products/Service:

- Diagnostic equipment
- Operating theater equipment
- Intensive care equipment
- Clinical analyzers
- Hematology equipment

All these products continue to offer the best sales prospects for U.S. firms. U.S. exports to Sri Lanka were valued at approximately \$2.8 million in this sector in 2005.

Resources:

- Ministry of Health: www.health.gov.lk
- World Bank: www.worldbank.org/lk

SWEDEN (2007)

Overview: Sweden's health system is one of the best and most well developed in the world. The population of just over 9 million enjoys very good health. With an average life expectancy of 78 years for men and 83 years for women, Swedes have the seventh highest life expectancy in the world. Infant mortality rates, which have always been low, are now ranked the second lowest in the world with 2.76 deaths per 1,000 births.

In 2004, health care expenditures were 8.3% of GDP. These costs, however, are expected to increase in the years to come. As Sweden has a population that is one of the oldest in the world, 18% are aged 65 or older, there will be increasing

demand for medical equipment and supplies, and longer medical treatments, to meet the health needs of an ageing population.

U.S. suppliers, dominating the import market, enjoy a good reputation. Major third country competitors include Germany, Denmark/Finland and the U.K.

Best Products/Services: The best sales potential during 2007-2009 for U.S. manufactured medical equipment is expected to be in the following areas:

- Telemedicine
- Medical informatics
- Non-invasive surgical equipment
- Orthopedic and prosthetic equipment
- Home health care

Resources:

- Swedish Medical Suppliers Association www.slf.nu
- The Swedish Handicap Institute www.hi.se
- National Board of Health & Welfare www.socialstyrelsen.se
- Commercial Service Trade Specialist Catharina Kronstrom catharina.kronstrom@mail.doc.gov

SWITZERLAND (2007)

Overview: The total Swiss market demand for medical equipment was valued at an estimated \$2.7 billion in 2006. With Europe's highest per capita income, Switzerland is an attractive, demanding market with one of the best national health care systems in the world.

The country's liberal trade and investment policies favor access for a host of products and technologies. The

dispersed nature of its health care system, which follows the pattern of its federal structure with 26 autonomous districts (cantons), contributes to the diversity of the market.

The combination of an aging population, rising living standards and new treatment methods is causing demand to grow at an above-average pace.

Accordingly, as incomes rise, so do people's willingness to spend more on health services. This is reflected by Switzerland being the European leader, spending 11% of GDP on healthcare.

However, as in other national healthcare systems, cost-containment is a growing concern, and there is a clear trend to reduce hospital beds and to close down some hospitals.

U.S. equipment and supplies enjoy a good reputation in Switzerland. Many Swiss doctors and professors of medicine have been trained or have practiced in the United States. Interchange in procedures and techniques are considerable between the countries. These factors create a strong demand for U.S. equipment and supplies.

Best Products/Services: The average Swiss still expects that hospitals should have the latest technology; therefore, U.S.-made products that are on the cutting-edge of technology will have great market potential. Furthermore, there is a growing recognition in the medical community that new innovative technologies often contribute to more economical patient care by helping to reduce the length of hospital stays.

The best sales potential for U.S.-manufactured medical equipment is in the following areas:

- Quality home health care, outpatient and rehabilitation equipment
- Advanced diagnostic systems (computer tomography, imaging systems, Nuclear Magnetic Resonance (NMR) scanners)
- Monitoring and intensive care equipment (X-Ray and Magnetic Resonance Imaging MRI)
- Sophisticated, computerized equipment and software
- Cardiology equipment
- Orthopedic devices
- Clinical laboratory equipment
- In-vitro diagnostic products
- Disposables, surgical consumables

Opportunities: Although Switzerland's market is relatively small with a population of only \$7.4 million, it is a highly sophisticated market with a strong demand for advanced technologies. It also offers the additional benefit of being a test market that is strategically placed in the heart of Europe. Switzerland's 593 hospitals and medical homes are mostly administrated by the 26 cantons or by local municipalities. In addition, a host of private clinics (103) cater to the needs of a demanding local and international clientele and serve as professional training grounds for physicians. In 2004, 15,199 medical doctors (of whom 10,472 are specialists) and 4,084 dentists with private offices were registered.

Specialized services, such as transplant capacities, are mainly offered at university clinics. In addition to laboratories in doctors' private offices, there are 442 independent laboratories

and 1,100 hospital and clinical laboratories.

Resources:

- FASMED (Swiss Association of the Medical and Hospital Trade):

<http://www.fasmed.com>

- Swissmedic (Swiss Agency for therapeutic products):

<http://www.swissmedic.ch>

SYRIA (2006)

Overview: The Syria Accountability and Lebanese Sovereignty Act (SAA) prohibit the export and re-export of most U.S. products to Syria. Products of the United States are defined as not only any good that is produced in and shipped from the U.S., but also any good that contains more than 10% *de minimus* U.S.-origin content regardless of where it is produced. In implementing the SAA, the President specified that certain items are eligible for export under waiver and are reviewed. These items are food and certain medicines, which do not require an export license, and the following major categories of items, which require licenses for export on a case by case basis with no guarantee of approval:

- (1) controlled pharmaceuticals and medical supplies and devices;
- (2) telecommunications equipment and associated computers, software and technology; and
- (3) parts and components intended to ensure the safety of civil aviation and the safe operation of commercial passenger aircraft.

For detailed information on all exempted items and a better understanding of the law, U.S. businesses should contact the U.S. Department of Commerce, Bureau of Industry and Security (BIS). General

information about the SAA sanctions can be found on BIS's homepage at www.bis.doc.gov or through the Office of Nonproliferation and Treaty Compliance / Foreign Policy Controls Division at 202-482-4252. U.S. businesses may also contact the Office of Exporter Services at 202-482-4811.

Even though investments are not currently banned under the law, U.S. businesses looking to invest in Syria should contact the Office of Foreign Assets Control at the Department of Treasury at:

www.ustreas.gov/offices/enforcement/ofac for additional clarification.

TAIWAN (2007)

Overview: Taiwan's medical device market is growing rapidly as the island's increasingly affluent population has more to spend on healthcare. Foreign firms supply most of the local demand for advanced equipment. Over 30% of imported medical devices are made in the United States. U.S. products are recognized by local end-users as technically superior, of high quality and durable.

The major factors impeding the growth of U.S. market share are the higher prices of American equipment, and relatively stronger promotional efforts by other foreign competitors. The national healthcare insurance program covers 98% of the eligible population, and provides reimbursement for a wide range of therapies. Cost considerations have forced hospitals to discharge patients before their treatment programs are completed. The system is under critical financial strain and the implementation of the so-called "Global Budget Program" is ushering in more

stringent reimbursement pricing that may slow the growth of the market, especially for new devices. Taiwan is a producer and exporter of disposable items and is also a contract manufacturer for foreign brand components. Due to the expectation that all medical equipment will be backed by an extended maintenance contract, there is virtually no market for refurbished items.

Best Products/Services:

- Cardiovascular Equipment
- Electroencephalographs
- Computerized Tomography
- Ultrasonic Scanning Apparatus
- Magnetic Resonance Imaging Apparatus
- Ultra-violet or infra-red Ray Apparatus
- Syringes, with or without Needles
- Tubular Metal Needles and Needles for Sutures
- Other Catheters, Cannulae and the like
- Artificial Kidney (Dialysis) Apparatus
- Artificial Respiration Apparatus
- Other Therapeutic Respiration Apparatus
- Artificial Joints
- Hip Prosthesis, Plates, Nails, Bone Screws, Bone Cement
- Other Apparatus based on the use of X-rays, for medical surgical or veterinary uses
- Cobalt 60 Teletherapy Apparatus

Opportunities: The major customers for U.S. medical equipment will continue to be public hospitals and large private clinics. Since business practices and sales channels in Taiwan are different from those in the United States, professional competence and local market knowledge are the most important factors when seeking representation in Taiwan. As a whole,

Taiwan's market is both promising and competitive. Despite the challenge posed by national health insurance reimbursement system reform, opportunities for U.S. suppliers of advanced medical devices are good and will likely remain strong for the foreseeable future.

Resources:

- Department of Health (DOH):
<http://www.doh.gov.tw/cht/default.aspx>

U.S. firms wishing to learn more about the medical equipment market are also encouraged to contact CS Taiwan, Angeli Chou, Commercial Specialist, at angeli.chou@mail.doc.gov or visit the website <http://www.buyusa.gov/taiwan/en>.

THAILAND (2007)

Overview: The market for medical devices in Thailand is expected to grow 24% in 2006 and 20% in 2007. Thailand remains heavily dependent on imported medical devices.

Imports dominate the market with an 89% share, and local production still concentrates on low technology and less sophisticated medical devices and accessories. Imports from the United States lead the import market with a 36% share and are expected to have an average growth of 25% in 2006 and 2007. Most major international manufacturers are well represented in the Thai market.

The market growth will derive mainly from the demands for health care facilities up grade and medical devices and accessories replacement. Hospitals, especially private hospitals, are trying to become a specialist in one or more of the

medical specializations in order to attract more patients.

Cardiac and ophthalmology are the two most famous specializations that most hospitals have identified themselves to be. A special international ward with foreign language speaking nurses and physicians to attract and treat international patients is another approach for hospitals to increase the customers. Replacements of the old devices and accessories to cutting edge medical equipment are inevitable.

Currently, there is not any new major hospital project both from the public and private sector. With the limited revenue faces by most public hospitals as a result of the introduction of the universal healthcare campaign by the Ministry of Public Health four years ago, investment in big-ticket medical devices is very limited. The coverage of the universal healthcare campaign to approximately 40 million populations in Thailand also affects the business of the private hospitals. They have found less and less patients visited and used their services.

All major private hospitals chose to upgrade themselves and paid more attention to international patients, expatriates, and local residence of high-income level as their major revenue generating means.

Thailand relies on the import of medical devices, especially sophisticated, higher-end devices. Local production of medical devices in Thailand is limited to less sophisticated devices, due mainly to the limited number of qualified researchers and limited investment in R&D required producing more sophisticated devices. Locally produced products include reagents, simple

disposable test kits, disposable syringes, artificial legs and other orthopedic accessories, and other simple disposable items.

Public hospitals are still major users and buyers of medical devices and supplies in Thailand. They account for approximately 60% of total purchases. Private hospitals have approximately a 40% share of the demand. The Ministry of Public Health reported that in 2005 there were 978 public hospitals with a combined 105,600 beds. There were 356 private hospitals with a combined 35,900 beds.

Medical devices are normally imported by, and brought to the market through, agents and/or distributors. Generally, an agent is appointed for a limited period of time, with the agreement renewable at the end of each term. Normally, the agent will keep stocks of low-priced items only. Stocks of large or more costly items will be ordered on an as needed basis. The agent's role not only covers marketing of the medical devices, but also customs clearing with the Thai Customs Department and taking necessary steps to arrange for product registration and import authorization from the Thai Food and Drug Administration (FDA). Thai FDA regulates importation of medical devices and accessories. Product registration with the Thai FDA is required prior to importation.

Use of local agents or distributors is highly recommended for marketing medical devices in Thailand. The agent provides immediate access to an established marketing network and in-depth knowledge about pertinent regulations. Buyers and end-users expect

a local representative to handle after-sales service and stock spare parts. The agent also should be expected to develop close personal relationships with the buyers and end-users, an important factor in future procurement decisions.

Best Products/Services: Best prospects for medical devices from the U.S. include:

- Heart valves and artificial blood vessels.
- Disposable diagnostic test kits.
- Quick diagnostic testing devices.
- Respiratory devices and oxygen therapy.
- Rehabilitation equipment and accessories.
- Orthopedic and Implant devices and accessories
- Minimum invasive surgical devices.
- Neurosurgical and other surgical devices and accessories.

Opportunities:

- Post-acute healthcare service, which involves providing healthcare and nursing services for patients at their homes.
- Construction of new and replacement hospitals.
- Implementation of hospital information system (HIS) in selected hospitals and clinics in improving healthcare delivery.

Resources:

Food and Drug Administration
Ministry of Public Health
www.fda.moph.go.th

CS Bangkok Contact:
Mr. Nalin Phupoksakul – Commercial Specialist
U.S. Commercial Service
American Embassy
E-mail: nphupoks@mail.doc.gov

TURKEY (2007)

Overview: Turkey, having a population of 70 million people, is a growing market for the medical products and services sectors. In Fiscal Year 2007, \$4.7 million was allocated to the Turkish Ministry of Health (MOH) by the Government of Turkey (GOT). The Ministry of Health (MOH) budget for Fiscal Year 2007 showed a 12% decrease compared to that of FY 2006. More than 60% of the health expenditures are devoted to medical services alone, while medical devices constitute a smaller portion of the total overall health expenditure budget. Major health services are provided by both public and private hospitals.

Approximately 40% of in-patient and 56% of the outpatient expenses are financed by the public sources. There is a strong trend of privatization in Turkey's health sector - although a high percentage of total hospital bed capacity is provided by government agencies. A larger number of private hospitals being built offer increased sales opportunities and less complicated procurement requirements vis-à-vis the often-confusing tender requirements of established by government agencies.

The Republic of Turkey has a number of specialist private care facilities operating on cardiovascular care, OBGYN, orthopedics and minimally invasive outpatient ambulatory procedures. A number of private hospitals are procuring angio-cath, radiological equipment and advanced surgical and life support technologies.

Best Products/Services:

- Disposable products
- Advanced med/surgery equipment including:
 - Angio-cath facilities
 - Radiology
 - Pathology
 - Electronic diagnostic equipment
 - Optical devices, parts and components of the medical devices
 - Electronic instruments and appliances for physical and chemical analysis
 - Vaccines
 - Orthotic and prosthetic equipment
 - OR/ER systems.

Opportunities: Turkish Medical Devices and Services Industry is growing at a fast pace. The total bed capacity in the Turkish Hospitals is approximately 200,000, which has increased more than 10% compared to that of year 2003.

Privatization and transformation of the healthcare system and the ongoing hospital projects of the Ministry of Health will also bring export opportunities.

The budget allocated to protective healthcare expenditures has showed an increase of 50.4% over the last 3-year period. In 2006 the protective healthcare expenditures constituted 7.8% of the overall public expenditures on health, which is higher than the OECD average.

As Turkey continues to expand the number of private hospitals, the purchase of advanced medical equipment will continue. In the year 2006 the Ministry of Health started operating 85 new healthcare facilities and new hospitals projects are being pursued. The Commercial Service in Ankara works

closely with several private hospitals, the Ministry of Health, local associations and medical device manufacturers in identifying supply sources for their equipment needs.

Resources:

- Export Promotion Center Of Turkey (IGEME)
<http://igeme.org.tr>
- Ministry of Health
<http://www.saglik.gov.tr>
- Health Industry Employers' Association (SEIS)
<http://www.seis.org.tr/>
- State Institute of Statistics
<http://www.tuik.gov.tr/>

UNITED ARAB EMIRATES (2007)

Overview: The UAE has seen remarkable progress in health care and comprehensive health programs have been adopted to meet the needs of UAE society. The UAE has a comprehensive, government-funded health service and a developing private health sector. Health care infrastructure has kept pace with other health care developments to ensure that adequate services are provided in the emirates. Both the Government and private sector expansion and upgrading are ongoing. The average annual growth during the next three years is estimated at 15%, due to the expansion in the number of hospitals and an increase in private health care facilities. Moreover, the UAE's explosive population growth has benefited many sectors of the economy and the medical equipment industry is no exception. According to a government report, the UAE population is expected to surge to \$6.6 million by

2010 if current growth rates are maintained.

In 2001, The General Authority for Health Services (GAHS) was established by a royal decree with a mandate to manage all the Ministry of Health hospitals and PHCs within the Emirate of Abu Dhabi. The aim of the GAHS is to upgrade and operate all of the Emirate of Abu Dhabi hospitals according to accredited international standards. It is said that GAHS has an open budget for 2005, which could exceed \$800 million, of which a major portion is spent on building new hospitals and upgrading current hospitals.

Currently GAHS operates 12 hospitals with a total of 1805 beds, with on going expansion efforts to increase the number of beds to 2500 beds. GAHS also operates 46 PHCs. GAHS has recently signed an agreement with Johns Hopkins Medical for the management and operations of Tawam Hospital for the next 10 years whereby JHM will employ its medical expertise in the field of health services in the UAE. GAHS is also negotiating other similar agreements with international healthcare providers for other major hospitals in the Emirate of Abu Dhabi.

The Ministry of Health (MOH), whose budget for 2005 was cut to \$230 million after the creation of GAHS, has federal responsibilities over the healthcare services in the UAE including managing the Northern Emirates healthcare system, excluding Dubai Emirate. Approximately 5% of the MOH budget is spent on medical machines, tools, and supplies. Currently MOH operates 13 hospitals with 2100 beds and 61 PHCs distributed throughout the Northern

Emirates. MOH has in the pipeline a plan for a 500-bed referral hospital, which will service the population of the Northern Emirates.

Dubai Department of Healthcare and Medical Services (DOHMS) was established in 1972 by the Ruler of Dubai to provide healthcare services in the Emirate of Dubai. DOHMS manages four hospitals, with 1504 beds and 20 PHCs & peripheral clinics distributed throughout the Emirate of Dubai.

On November 5, 2002, Dubai launched the Dubai Healthcare City (DHC) project. This new project will create a global healthcare center in Dubai. The total cost of this project is estimated at \$1.8 billion and is expected to be completed and fully operational by 2010. DHC will include medical education and a research center, specifically addressing postgraduate schools and on the job education and clinical research. It will include a leading and innovative business center leveraging the integration of technology and healthcare services (e.g. Tele-Health, E-enabled services). The DHC project consists of three medical clusters:

- 1) The University Medical Complex which includes a University Hospital, a Medical School, a Nursing School, and a Life Sciences Research Center
 - 2) The Medical Cluster which includes Day Clinics, a Specialized Diagnostic Laboratory and a Rehabilitation Center
 - 3) The Wellness Cluster which includes, Check up Clinics and Sports Medicine.
- Phase I of the project has been completed and sold out. 90% of the planning for phase II, which is four times more than phase I, is completed

and investment opportunities in this phase will be put on offer shortly. Total investments in phase I and phase II has been projected at \$2.9 billion.

In 2005, the UAE market for medical equipment and supplies was estimated at \$235 million, with US imports accounting for 28.5% of the total. With the recent increase in the Euro exchange rate, the demand for US medical equipment in the local market has increased noticeably. Major US imports are diagnostic, therapeutic and patient monitoring equipment, which are perceived to be high technology and state of the art. US medical equipment and supplies as well as healthcare technology and services are considered to be highly reliable and are preferred.

The US commands a major market share with regard to imaging and monitoring equipment, ventilators, and life support and operating theater equipment. Local production accounts for only 7.5% of the market for medical equipment and supplies. Only 2% of imports and locally produced medical supplies are re-exported. Aside from the US, the UAE imports medical equipment and pharmaceuticals from France, Germany, Italy, UK, Italy, Sweden, and Japan.

Companies exporting medical equipment to the UAE are required to have a local agent registered with the MOH. Medical equipment carries a 5% import duty.

Best Products/Services: The most promising sub-sectors within the healthcare sector, with the estimated 2006 Total Market Size of each in millions of US dollars:

- Diagnostic equipment \$70
- Therapy & Rehabilitation Eq. \$60

- Disposables \$50
- Monitoring Equipment \$45
- Medical Aids \$30
- Surgical \$20
- Other \$50

Opportunities: The following is an indicative, but not a comprehensive list, of opportunities available in the UAE in the healthcare sector:

- 125 bed hospital servicing Jumeirah, Jebel Ali and New Dubai districts of Dubai, the first phase of which is to be completed by December 2007 (\$81.7 million).
- 200 bed hospital to service residents of Umm al Quwain (\$54.4 million).
- 65 bed International Modern Hospital in Dubai to opened in May 2005, run by the International Medical Group. Includes various outpatient clinics, ophthalmology, cardiology and ENT departments, dietetics, emergency services, intensive care, internal medicine, obstetrics & gynecology, physiotherapy, radiology and surgery (\$27.2 million).
- Private hospital to be built next to the existing Saqr hospital in the Emirate of Ras Al Khaimah
- Welcare World health Systems 210 bed City Hospital at the Dubai Health Care City to be complementing the Group's existing Creek Hospital. The new facility will specialize in cardiology and orthopedics.
- Mayo Clinic Middle East Regional Office opened in Dubai Health Care city in April 2005 specializing in cardiology outreach services, diagnostic and non-invasive therapies.

- MOH New Rashid Hospital to replace the existing Rashid Hospital in Dubai. The 600 bed facility will concentrate on improving dental and rehabilitation services and controlling infectious diseases but will also boat a coronary care facility and intensive care and burns unites (\$81.76. million).

- MOH 500 bed referral hospital to serve the Northern Emirates. Project is in planning phase.

- Private healthcare group NMC opened a specialty hospital in the Al-Nahda district of Dubai in March 2005. The 100-bed hospital specializes in allergies, cardiology, maternity care and pediatrics (\$225 million).

- The Canadian Specialist Hospital, a private multi specialty facility opened in January 2005 in Dubai.

- 100 bed private hospital for Maternity and pediatric hospital in Abu Dhabi is in design stage.

- Two story maternity unit to be built at Fujairah Hospital, including 90 beds, three operating theaters, five labor rooms, clinical and emergency areas and 28 beds for newborn and premature babies (\$14 million);

- Expansion of Zulekha Hospital in Al Nahda completed in October 2004, with 75 beds and specializing cardiology, nephrology, endocrinology, plastic surgery, orthopedics, pediatrics and dermatology.

- Expansion of Kalba Hospital completed in September 2004 (\$322.4 million).

- German Sports Medical Center, to be built in Dubai's Sport city, is expected to be completed by summer 2006 and will specialize in cardiology, orthopedics, neurosurgery and rehabilitation.

- Cleveland Clinic has signed a 15 years with the Abu Dhabi Government to establish, develop and run a Cleveland Abu Dhabi Clinic using its systems, procedures, guidelines and standards. Details about the hospital are still not clear, but Cleveland was given a 3 years deadline to have the project up and running.

Resources:

www.moh.gov.ae

www.dohms.gov.ae

www.arabhealthonline.com

Commercial Specialist:
Rula Goussous Omeish
P.O. Box 4009
Abu Dhabi, U.A.E.
Tel: 971-2-414 2304
Fax: 971-2-414 2228
E-mail: rula.omeish@mail.doc.gov

URUGUAY (2007)

Overview: Uruguay's demographic picture ensures that the demand for medical supplies and equipment is relatively steady and will continue to be so. Compared to other Latin American countries, Uruguay has an aging society. More than 20% of the population is 65 years and over, and the average life expectancy is 75.

Cardiovascular problems and cancer are the two leading causes of death among Uruguayans over 45 years old.

Oncologies as well as pediatric care are key priorities.

Approximately 35% of Uruguay's total medical equipment imports are for the public sector while 65% are for the private sector. Imports in this sector grew by 27% vis-à-vis 2004 and the U.S. market share grew by 10%. Customs duties for medical equipment range from 0% to 20%.

All medical products and importers have to be registered and approved by the Ministry of Public Health (MPH). Only local companies approved by the MPH can register equipment, supplies, and pharmaceuticals.

Best Products/Services: The majority of products for local distribution are imported from the U.S., Argentina, Brazil and, the EU and Japan.

The U.S. is the number one origin of total imports for products that fall under HS codes 9018 (35%), 9019 (33%), 9021 (27%) and, second place under 9022 (39%). These imports include:

- CT scanners
- X-ray equipment
- Angiography and angioplasty
- Optical and dental instruments and supplies
- Supplies for blood transfusions and IV
- All cardiology and surgical equipment and supplies
- Catheters
- Probes and scalpels
- Prosthesis and implants
- Other medical equipment and supplies in general.

Very little production occurs in Uruguay. Except for low-tech monitors, almost none of the medical equipment

and surgical supplies sold in Uruguay are produced locally.

There is a demand for new, technologically advanced supplies and equipment, particularly those related to non-invasive procedures, ultrasound, magnetic resonance imaging and CT scans.

Opportunities: During the past decade, the private sector has been investing in equipment and facilities in an effort to provide better and more competitive services. Both public and private institutions turn to U.S. sources for supplies and training/management services. U.S. suppliers should take advantage of these opportunities since professionals and patients value U.S. expertise and equipment.

Currently, neither the Inter-American Development Bank (IADB) nor the World Bank (WB) has projects in the pipeline that would fund procurement in the medical sector. For project updates please check in Resources.

Resources:

- Embassy Contact: Lilian Amy, Sector Specialist – lilian.amy@mail.doc.gov

<http://www.buyusa.gov/Uruguay/en>

-Ministry of Public Health:

<http://www.msp.gub.uy>

-National Fund of Resources

(procurement) <http://www.fnr.gub.uy>

For project updates at the Inter-American Development Bank (IADB) and/or World Bank

check in:

- Inter-American Development Bank:

<http://www.iadb.org/exr/doc98/pro/paisur.htm>

<http://itsdc16.iadb.org/idbppi/asp/ppProcurement.aspx>

- World Bank:

<http://web.worldbank.org/WBSITE/EXTERNAL/PROJECTS/0,,menuPK:115635~pagePK:64020917~piPK:64021009~theSitePK:40941,00.html>

V. TRADE EVENTS

Trade events, such as trade shows and trade missions, offer excellent opportunities for face-to-face interaction with foreign buyers and distributors. Of the many U.S. and international events held throughout the year, some are vertical (single industry theme) and some horizontal (many industries represented). The events organized or approved by the U.S. Department of Commerce can be especially useful for first-time or infrequent participants – they require less lead time to register and typically involve more handholding.

Some major trade events for the Medical Equipment & Supplies Industry in 2007 are listed below.

May, 2007

MIDO 2007 - International Optics, Optometry and Ophthalmology Exhibition -- Medical Eq.

Location/Date: Milan, Italy 5/4/2007 - 5/7/2007
Contacts: Federico Bevini, Milan, Commercial Specialist
Federico.Bevini@mail.doc.gov
Phone: Direct +39 02 6268 8520 or Main +39 02 02 6268 851

June, 2007

Hospitalar 2007 -- multiple industry sectors

Location/Date: Sao Paulo, Brazil 6/12/2007 - 6/15/2008
Website: <http://www.hospitalar.com>
Website: <http://www.mdna.com>
Contacts: Jefferson Oliveira, Sao Paulo, Commercial Specialist
Phone: 55/11/5186-7136
Jefferson.Oliveira@mail.doc.gov
John A. Harris, Sao Paulo
Senior Commercial Officer
Phone: 55-11-5186-7401
John.A.Harris@mail.doc.gov
Raymond Robinson, Trade Event Programs
Senior International Trade Specialist
Phone: 202-482-0610
Raymond_Robinson@ita.doc.gov
Mr. Ryan Klemm, Messe Dusseldorf International
Phone: 312-781-5180 rklemm@mdna.com

October, 2007

Healthcare Technologies Trade Mission to Turkey, Jordan, and Egypt -- multiple industry sectors

Location/Date: Istanbul, Turkey 10/25/2007 - 10/27/2007
Amman, Jordan 10/27/2007 - 10/30/2007
Cairo, Egypt 10/30/2007 - 11/1/2007

Contacts: Ebru Olcay, Istanbul, Commercial Specialist
Phone: 90-212-335-9223
Ebru.Olcay@mail.doc.gov
Jihan Labib, Cairo, Commercial Specialist
Phone: +20 (2) 797-2223
Jihan.Labib@mail.doc.gov
Lisa Huot, Trade Event Programs, Senior International Trade Specialist
Phone: 202-482-2796
Lisa.Huot@mail.doc.gov
Muna Farkouh, Amman, Senior Commercial Specialist
Phone: 962-6-590-6057
Muna.Farkouh@mail.doc.gov

November, 2007

SOFCOT -- Medical Eq.

Location/Date: Paris, France 11/5/2007 - 11/8/2007
Website: <http://www.sofcot.com.fr/www/congres1.htm>
Contacts: Alain Levy, Paris, Commercial Specialist
Phone: [33] (0)1 43 12 29 02
Alain.Levy@mail.doc.gov

Trade Event Directories

The Trade-Event Scheduling Web sites listed below allow selective searches for upcoming events by industry, location, type and date. They typically provide the event organizer, event descriptions and costs, and people to contact for more information. To find upcoming events for U.S. Medical Equipment & Supplies, use industry search terms relating to Medical Equipment, Medical Supply, or Health Care.

Schedules for U.S. Government Organized or Sponsored Events

Domestic USDOC Events: http://www.export.gov/comm_svc/us_event_search.html
International USDOC Events: http://www.export.gov/comm_svc/us_event_search.html
USDA (Food & agriculture) Events: <http://www.fas.usda.gov/scripts/agexport/EventQuery.asp>

Schedules for Commercially Organized Events

Expo 24-7 (<http://www.expo24-7.com/default.asp>)
TSNN (<http://www.tsnn.com/>)
ExpoWorldNet (<http://www.expoworld.net/>)
Exhibition Center – Foreign Trade Online (<http://www.foreign-trade.com/exhibit.htm>)

VI. AVAILABLE MARKET RESEARCH

U.S. MEDICAL EQUIPMENT AND SUPPLIES

The reports listed below are country-specific market surveys relating to Medical Equipment & Supplies, written by resident U.S. commercial staff in each country. Many of these reports analyze demand trends, the competition, business practices, distribution channels, promotional opportunities, and trade barriers.

All the reports can be obtained on-line at no cost from www.export.gov, or in print/on disk for \$25.00 from:

CENTER FOR INTERNATIONAL TRADE DEVELOPMENT

13430 Hawthorne Blvd, Hawthorne, California 90250 USA

Phone: (310) 973-3173 Fax: (310) 973-3132 E-mail: mkogon@elcamino.edu

| SPECIFIC INDUSTRY SECTOR | Country | Date: |
|---|------------|------------|
| Medical Equipment and Devices | Argentina | 8/31/2006 |
| Labeling Requirements for Medical Products sold in Argentina | Argentina | 6/1/2005 |
| Medical Device Registration Requirements | Australia | 3/31/2005 |
| Australia Market Overview: Clinical/Diagnostic Sector | Australia | 6/9/2004 |
| The Austrian Market for Medical Equipment | Austria | 9/2/2005 |
| The Belgian Market for In-Vitro Diagnostics | Belgium | 9/6/2005 |
| The Market for In-Vitro Diagnostics | Brazil | 8/3/2006 |
| Increased cancer Spending in Brazil | Brazil | 10/23/2006 |
| Medical Equipment, Minas Gerais and the Northeast | Brazil | 6/6/2006 |
| Diagnostic Medical Equipment | Brazil | 11/29/2005 |
| Overview of the Brazilian Market of Gastroenterology | Brazil | 10/28/2005 |
| Private Hospitals | Brazil | 9/12/2005 |
| Medical Procurement Opportunities for the 2007 Pan-American Games | Brazil | 6/20/2005 |
| Cardiovascular Equipment | Brazil | 6/20/2005 |
| Medical Equipment in Bulgaria | Bulgaria | 2/12/2007 |
| Emergency Medical Equipment | Canada | 8/14/2006 |
| New \$120 Million Demand for Medical Imaging and Radiation Eq. | Canada | 2/7/2005 |
| Focus on Medical Imaging Technology in Canada | Canada | 1/20/2005 |
| Canadian Health Care : A Primer | Canada | 1/7/2005 |
| Optical Equipment and Supplies | Chile | 9/14/2006 |
| Healthcare and Medical Equipment | Chile | 6/30/2006 |
| Chile's Healthcare/Medical Equipment Sector | Chile | 5/31/2005 |
| Care and Rehabilitation Industry Overview | China | 12/31/2006 |
| China: The Dental Laboratory Equipment and Materials Market | China | 7/21/2006 |
| Medical Devices Needed for the Beijing 2008 Olympics | China | 7/12/2005 |
| Radiology Equipment | Colombia | 12/16/2005 |
| Health Care Services and Equipment | Colombia | 7/14/2005 |
| Medical Equipment | Costa Rica | 1/9/2004 |
| The Danish Market for Medical Devices | Denmark | 11/27/2006 |

| SPECIFIC INDUSTRY SECTOR | Country | Date: |
|---|---|--------------|
| Used Medical Equipment | Ecuador | 10/3/2003 |
| Healthcare/Medical Svcs/Eq. – Access Eastern Mediterranean Market | Egypt | 12/28/2004 |
| Medical Equipment Market Profile | Egypt | 10/19/2004 |
| Egyptian Standards for Medical Devices and Instruments | Egypt | 8/29/2004 |
| Medical Equipment Central America Market Overview | El Salvador; Honduras; Costa Rica; Guatemala; Nicaragua | 5/18/2005 |
| An Introduction to the Medical Device Legislation in the European Union | European Union | 10/24/2006 |
| Medical Equipment Market Report | Finland | 9/29/2006 |
| Germany: Medical Devices Industry Overview | Germany | 4/26/2006 |
| Orthopedic Products | Germany | 7/28/2005 |
| In-Vitro Diagnostics Market | Germany | 5/17/2005 |
| Healthcare Products and Services –Ghana | Ghana | 6/14/2004 |
| Disposable Products for Healthcare | Hong Kong | 5/19/2005 |
| Orthopedic and Rehabilitation Equipment | Hungary | 1/30/2004 |
| Overview of the Medical Equipment Market | Italy | 9/29/2006 |
| In-Vitro Diagnostic Market in Italy | Italy | 9/28/2006 |
| Medical Imaging Equipment | India | 8/23/2006 |
| Ortho (Physiotherapy and Rehabilitation) Equipment (MED) | India | 5/18/2005 |
| Cancer Diagnostic and Therapy Equipment | India | 4/21/2005 |
| Diagnostic/Clinical laboratory market | India | 6/24/2004 |
| Clinical Lab Equipment Market in Indonesia | Indonesia | 5/23/2006 |
| Medical Equipment and Supplies | Indonesia | 6/17/2004 |
| Medical Equipment | Israel | 10/23/2006 |
| Medical Equipment Market & Promotional Opportunities | Israel | 9/29/2004 |
| Access Eastern Mediterranean Healthcare Program | Israel; Jordan; West Bank; Egypt; Lebanon; Turkey | 2/5/2004 |
| Hospital Expansion and Expansion Boom in Kyushu | Japan | 5/10/2006 |
| Medical Devices | Japan | 8/30/2005 |
| Opportunities for Emergency Medical Care Prods and Svcs in Kyusyu | Japan | 7/10/2005 |
| Health and Medical Market Research | Jordan | 5/3/2005 |
| Clinical Laboratory Market Opportunities in Kazakhstan | Kazakhstan | 7/8/2005 |
| Kazakhstan's Market for Medical Equipment and Supplies | Kazakhstan | 3/16/2005 |
| Clinical Diagnostics Instruments and Products Market in Kazakhstan | Kazakhstan | 6/14/2004 |
| Electro-Medical Equipment Market | Kenya | 4/29/2003 |
| Medical Equipment – Market Brief | Lebanon | 10/27/2004 |
| Malaysia: An Overview of the Medical Device Equipment | Malaysia | 5/30/2006 |
| More Health Centers for Malaysia | Malaysia | 2/08/2007 |

| SPECIFIC INDUSTRY SECTOR | Country | Date: |
|---|----------------|--------------|
| Cancer Diagnostic/Therapy Equipment | Malaysia | 8/2/2005 |
| Market Share for Medical Instruments | Mexico | 8/11/2006 |
| Medical Equipment: Jalisco | Mexico | 10/28/2005 |
| Import Market for Medical Equipment | Mexico | 5/27/2005 |
| Test Kits and Diagnostic Reagents | Mexico | 4/27/2005 |
| Refurbished Medical Equipment | Mexico | 6/25/2004 |
| Home Healthcare | Netherlands | 9/21/2006 |
| In-Vitro Diagnosis | Netherlands | 9/21/2006 |
| Medical Equipment and Supplies | Netherlands | 7/11/2006 |
| Diagnostics Products | Netherlands | 8/3/2005 |
| Orthopedic Equipment | Netherlands | 5/31/2005 |
| Medical Equipment in New Zealand | New Zealand | 9/8/2005 |
| Medical Diagnostic Equipment | Nigeria | 6/2/2005 |
| Medical Equipment | Norway | 3/17/2003 |
| Qatar: Health & Medical Sector Trends and Opportunities | Qatar | 2/24/2005 |
| Medical Equipment and Supplies | Romania | 6/5/2006 |
| Russian Healthcare Reform: Opportunities for U.S. Medical Equipment | Russia | 2/16/2007 |
| Russian Medical Equipment Market | Russia | 12/13/2004 |
| The Russian Immunodiagnosics Products Market | Russia | 9/27/2004 |
| Medical & Health Care Market | Saudi Arabia | 8/18/2004 |
| Clinical Diagnostic Market in Singapore | Singapore | 8/7/2006 |
| Medical Equipment and Technology in South Africa | South Africa | 7/26/2004 |
| How to Obtain Marketing Clearance for Medical Devices in Korea | South Korea | 5/16/2005 |
| Orthopedic Artificial Joint Implants | South Korea | 7/28/2003 |
| Market for Medical Devices | South Korea | 5/20/2003 |
| Medical Information Technologies | South Korea | 3/19/2003 |
| In-Vitro Diagnostic Market | Spain | 1/29/2007 |
| Anesthesia and Respiratory Medical Devices | Spain | 5/31/2005 |
| Defibrillators Market in Spain | Spain | 7/14/2004 |
| An Overview of the Spanish Medical Devices Market | Spain | 5/14/2004 |
| Home Health Care and Assistive Technologies | Sweden | 6/14/2005 |
| Orthopedic Devices | Switzerland | 8/18/2006 |
| Cardiac Devices | Switzerland | 7/10/2006 |
| In-Vitro Diagnostics | Switzerland | 9/13/2005 |
| Medical Equipment | Syria | 3/28/2003 |
| Implantable Medical Devices | Taiwan | 6/28/2005 |
| Taiwan's Medical Devices Market | Taiwan | 2/15/2005 |
| Orthopedic Devices and Accessories Market | Thailand | 2/27/2006 |
| Medical Equipment and Supplies | Thailand | 12/28/2006 |
| Healthcare Medical Market in Turkey | Turkey | 2/27/2006 |
| Medical & Surgical Products | Turkey | 3/17/2003 |
| Diagnostic Imaging Equipment | UAE | 9/28/2006 |
| Medical Equipment in the United Arab Emirates | UAE | 10/29/2005 |
| Medical Equipment | UAE | 4/7/2003 |

| SPECIFIC INDUSTRY SECTOR | Country | Date: |
|---|----------------|--------------|
| The UK Medical Equipment Market | UK | 7/11/2006 |
| UK Health Care Market: An Overview | UK | 4/27/2006 |
| The UK Surgical Instrument and Appliance Market | UK | 11/23/2005 |
| Overview of the UK Medical Equipment Market | UK | 1/10/2005 |
| Medical Equipment Market Brief | Uruguay | 6/14/2006 |
| Registering Medical Equipment | Uruguay | 10/27/2006 |
| Makeover Trends in Plastic Surgery | Uruguay | 10/28/2004 |
| Orthopedic and Rehabilitation Equipment in Uzbekistan | Uzbekistan | 10/22/2003 |
| Medical Equipment Market in Vietnam | Vietnam | 6/29/2005 |

APPENDIX

Products in Medical Equipment & Supplies, by Schedule B Code

HS 9018: 33 Items

| Schedule B Code | Description |
|----------------------------|---|
| 9018110040 | ELECTROCARDIOGRAPHS |
| 9018110080 | PARTS AND ACCESSORIES FOR ELECTROCARDIOGRAPHS |
| 9018120000 | ULTRASONIC SCANNING APPARATUS |
| 9018130000 | MAGNETIC RESONANCE IMAGING APPARATUS USED IN MEDICAL, SURGICAL, DENTAL OR VETERINARY SCIENCES |
| 9018140000 | SCINTIGRAPHIC APPARATUS FOR USE IN MEDICAL, SURGICAL, DENTAL OR VETERINARY SCIENCES |
| 9018194000 | ELECTRO-DIAGNOSTIC APPARATUS FOR FUNCTIONAL EXPLORATORY EXAMINATION, AND PARTS AND ACCESSORIES THEREOF |
| 9018195500 | PATIENT MONITORING SYSTEMS |
| 9018197500 | PRINTED CIRCUIT ASSEMBLIES FOR PARAMETER ACQUISITION MODULES |
| 9018199530 | BASAL METABOLISM AND BLOOD PRESSURE APPARATUS |
| 9018199535 | ELECTROENCEPHALOGRAPHS (EEG) AND ELECTROMYOGRAPHS (EMG) |
| 9018199550 | ELECTRO-DIAGNOSTIC APPARATUS, USED IN MEDICAL, SURGICAL, DENTAL OR VETERINARY SCIENCES, NESOI |
| 9018199560 | PARTS AND ACCESSORIES FOR ELECTRO-DIAGNOSTIC APPARATUS, FOR USE IN MEDICAL, SURGICAL, DENTAL OR VETERINARY SCIENCES |
| 9018200000 | ULTRAVIOLET OR INFRARED RAY APPARATUS, AND PARTS AND ACCESSORIES |
| 9018310040 | HYPODERMIC SYRINGES, WITH OR WITHOUT THEIR NEEDLES |
| 9018310080 | OTHER SYRINGES, WITH OR WITHOUT THEIR NEEDLES, NESOI |
| 9018310090 | PARTS AND ACCESSORIES FOR SYRINGES, WITH OR WITHOUT THEIR NEEDLES |
| 9018320000 | TUBULAR METAL NEEDLES AND NEEDLES FOR SUTURES AND PARTS AND ACCESSORIES THEREOF |
| 9018390030 | BOUGIES, CATHETERS, DRAINS AND SONDES AND PARTS AND ACCESSORIES |

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| 9018390050 | CANNULAE AND THE LIKE AND PART AND ACCESSORIES |
| 9018410000 | DENTAL DRILL ENGINES, WHETHER OR NOT COMBINED ON A SINGLE BASE WITH OTHER DENTAL EQUIPMENT, AND PARTS AND ACCESSORIES |
| 9018490000 | OTHER INSTRUMENTS AND APPLIANCES, USED IN DENTAL SCIENCES; AND PARTS AND ACCESSORIES, EXCEPT DENTAL DRILL ENGINES, NESOI |
| 9018500000 | OTHER OPHTHALMIC INSTRUMENTS AND APPLIANCES AND PARTS AND ACCESSORIES |
| 9018901500 | OPTICAL INSTRUMENTS AND APPLIANCES AND PARTS AND ACCESSORIES, NESOI |
| 9018903000 | ANESTHETIC INSTRUMENTS AND APPLIANCES AND PARTS AND ACCESSORIES |
| 9018904000 | PERCUSSION HAMMERS, STETHOSCOPES AND PARTS OF STETHOSCOPES |
| 9018905000 | SPHYGMOMANOMETERS, TENSIMETERS AND OSCILLOMETERS; ALL THE FOREGOING AND PARTS AND ACCESSORIES |
| 9018906000 | ELECTRO-SURGICAL INSTRUMENTS AND APPLIANCES AND PARTS AND ACCESSORIES |
| 9018907020 | DIALYSIS INSTRUMENTS AND APPARATUS |
| 9018907040 | ULTRASONIC THERAPEUTIC APPLIANCES AND INSTRUMENTS |
| 9018907060 | OTHER THERAPEUTIC APPLIANCES AND INSTRUMENTS, EXCEPT ULTRASONIC |
| 9018907070 | PARTS AND ACCESSORIES OF DIALYSIS INSTRUMENTS AND APPARATUS |
| 9018907080 | ELECTRO-MEDICAL INSTRUMENTS AND APPLIANCES AND PARTS AND ACCESSORIES, NESOI |
| 9018908000 | OTHER INSTRUMENTS AND APPLIANCES USED IN MEDICAL, SURGICAL, DENTAL OR VETERINARY SCIENCES, NESOI |

Products in Medical Equipment & Supplies, by Schedule B Code

HS 9019: 3 Items

| Schedule B Code | Description |
|----------------------------|--|
| 9019102000 | MECHANO-THERAPY APPLIANCES AND MASSAGE APPARATUS; PARTS AND ACCESSORIES |
| 9019105000 | PSYCHOLOGICAL APTITUDE-TESTING APPARATUS AND PARTS AND ACCESSORIES |
| 9019200000 | OZONE THERAPY, OXYGEN THERAPY, AEROSOL THERAPY, ARTIFICIAL RESPIRATION OR OTHER THERAPEUTIC RESPIRATION APPARATUS; PARTS AND ACCESSORIES |

HS 9021: 10 Items

| Schedule B Code | Description |
|----------------------------|---|
| 9021100050 | BONE PLATES, SCREWS AND NAILS, AND OTHER INTERNAL FIXATION DEVICES OR APPLIANCES |
| 9021100090 | ORTHOPEDIC OR FRACTURE APPLIANCES AND PARTS AND ACCESSORIES THEREOF, NESOI |
| 9021214000 | ARTIFICIAL TEETH OF PLASTIC AND PARTS AND ACCESSORIES |
| 9021218000 | ARTIFICIAL TEETH, EXCEPT OF PLASTIC AND PARTS AND ACCESSORIES |
| 9021290000 | DENTAL FITTINGS AND PARTS AND ACCESSORIES |
| 9021310000 | ARTIFICIAL JOINTS AND PARTS AND ACCESSORIES THEREOF |
| 9021390000 | OTHER ARTIFICIAL PARTS OF THE BODY AND PARTS AND ACCESSORIES |
| 9021400000 | HEARING AIDS, EXCLUDING PARTS AND ACCESSORIES |
| 9021500000 | PACEMAKERS FOR STIMULATING HEART MUSCLES, EXCLUDING PARTS AND ACCESSORIES |
| 9021900000 | OTHER APPLIANCES WHICH ARE WORN OR CARRIED, OR IMPLANTED IN THE BODY, TO COMPENSATE FOR A DEFECT OR DISABILITY AND PARTS AND ACCESSORIES, NESOI |

Products in Medical Equipment &Supplies, by Schedule B Code

HS 9022: 13 Items

| Schedule B Code | Description |
|----------------------------|---|
| 9022120000 | COMPUTED TOMOGRAPHY APPARATUS |
| 9022130000 | APPARATUS BASED ON THE USE OF X-RAYS FOR DENTAL USES, NESOI |
| 9022140000 | APPARATUS BASED ON THE USE OF X-RAYS FOR MEDICAL, SURGICAL, OR VETERINARY USES, NESOI |
| 9022190000 | APPARATUS BASED ON THE USE OF X-RAYS FOR OTHER USE, EXCEPT MEDICAL, SURGICAL, DENTAL OR VETERINARY, INCLUDING RADIOGRAPHY OR RADIOTHERAPY APPARATUS |
| 9022210000 | APPARATUS BASED ON THE USE OF ALPHA, BETA OR GAMMA RADIATIONS FOR MEDICAL, SURGICAL, DENTAL OR VETERINARY USES |
| 9022294000 | APPARATUS BASED ON THE USE OF ALPHA, BETA OR GAMMA RADIATIONS FOR SMOKE DETECTORS, IONIZATION TYPE |
| 9022298000 | APPARATUS BASED ON THE USE OF ALPHA, BETA OR GAMMA RADIATIONS FOR OTHER USE, NESOI |
| 9022300000 | X-RAY TUBES |
| 9022902000 | HIGH TENSION GENERATORS, CONTROL PANELS, DESKS, SCREENS EXAMINATION OR TREATMENT TABLES,CHAIRS AND THE LIKE, NESOI |
| 9022904000 | PARTS AND ACCESSORIES OF X-RAY TUBES |
| 9022906000 | PARTS AND ACCESSORIES OF APPARATUS BASED ON THE USE OF X-RAYS |
| 9022907000 | PARTS AND ACCESSORIES OF IONIZATION TYPE SMOKE DETECTORS |
| 9022908000 | PARTS AND ACCESSORIES OF HIGH TENSION GENERATORS, CONTROL PANELS, DESKS, SCREENS EXAMINATION OR TREATMENT TABLES,CHAIRS & THE LIKE,NESOI |