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• Innovation in oncology cannot be measured only by the availability of new therapies •

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India's healthcare market has crossed \$400 billion in FY26, growing at 8-12% annually. With digital health infrastructure scaling at a rapid pace, artificial intelligence (AI) moving from pilot projects into everyday clinical use, and patients across tier one and tier two cities demanding faster, more transparent, and more affordable care, healthcare in India is at a genuine inflection point in 2026. During a recent conversation with Dr Pankaj Gupta, Senior Director of Medical Affairs, Pfizer India, BioSpectrum highlights how both public and private sectors are driving the growth of the healthcare sector in the country.



India's healthcare landscape is evolving rapidly, with greater emphasis on prevention, innovation and patient-centered care. From your perspective, what are the key priorities that will shape better health outcomes over the next decade?

India's next phase of healthcare evolution will be defined by how effectively we move from responding to illness to identifying risk earlier, diagnosing disease sooner and intervening at the right time in the patient journey. With roughly two-thirds of Indians (about 68%) currently in the 15–64 working-age bracket, keeping this population healthy is both a public-health and an economic priority. That makes prevention and early detection central to tackling the growing burden of chronic and infectious diseases, including vaccine-preventable diseases.

Additionally, the foundations of healthcare such as primary care, health literacy, screening and diagnostics need further strengthening, to improve the ability of the system to identify patients at risk and intervene earlier. Recent conversations around making cancer a nationally notifiable disease are a step in that direction.

Thirdly, empowering clinicians with digital tools like Electronic Medical Records (EMR) and advanced data analytics can meaningfully support this evolution. However, technology will only have the greatest value when it complements clinical judgement and improves the continuity of care at scale.

Most importantly, scientific progress must translate into patient impact. To be truly patient-centric, we must have closer collaboration among clinicians, researchers, academia, policymakers, industry and patient communities. For India, the opportunity is not simply to adopt advances in healthcare, but to build an ecosystem capable of translating science and innovation into better and more equitable health outcomes.

As India shifts its focus from treatment to prevention, what role do you see preventive healthcare, particularly adult immunisation, playing in improving population health outcomes, and what more is needed to strengthen uptake?

Adult immunisation is one of the most powerful — and most underused — levers we have for shifting healthcare towards prevention across every stage of life. As people live longer and the burden of chronic and non-communicable conditions such as diabetes, cardiovascular disease and chronic respiratory disease increases, vaccine-preventable infections can have greater consequences, particularly among older adults and people living with underlying conditions.

Pneumococcal disease remains one of the clearest examples of this burden in India – *Streptococcus pneumoniae* is reported to cause an estimated 20–30% of community-acquired pneumonia in Indian patients, and its incidence rises with age — reaching around 31% among adults aged 60 and above.

The opportunity is to move beyond the perception that vaccination is a childhood-only intervention, through sustained education and awareness. Adult vaccination can help protect people at different stages of life from a range of serious infections and contribute to healthier ageing as a nation, while easing pressure on our health systems.

Our efforts with hospitals to establish Centres of Excellence for adult vaccination focus on building an ecosystem in which healthcare professionals can identify eligible adults and patients can receive appropriate guidance.

Pneumococcal vaccination is a good example of prevention translating into clinical practice – the Unified Consensus on Adult Immunization 2026 guideline recommends pneumococcal vaccination for adults 18-49 years with chronic conditions such as diabetes, cardiovascular and chronic respiratory disease and all adults above 50 years of age, to help reduce the risk of pneumococcal disease.

Improving uptake, however, requires more than awareness. Vaccination needs to become part of routine conversations between healthcare professionals and patients, and among families and loved ones, supported by access, clear recommendations and integration into preventive health visits. One must consult their healthcare professional before turning awareness into action.

Oncology remains a key area of unmet medical need. How do you see the oncology landscape in India evolving over the next five years, and what role will scientific innovation play in improving patient outcomes?

India's cancer burden, estimated at approximately 1.41 million new cases and nearly 917,000 deaths (GLOBOCAN 2022), makes improving outcomes an urgent priority. The next phase of oncology will be shaped by earlier diagnosis, greater molecular understanding of disease and more precise approaches to treatment.

Our scientific innovations are focused on reshaping cancer care through advances in biomarkers, molecular diagnostics, targeted therapies and novel treatment modalities that will allow physicians to make more informed therapeutic decisions and tailor treatment strategies to the unique biology of each patient's disease. Pfizer's oncology research spans multiple tumour types, including lung, breast, prostate, hematological and colorectal cancers and treatment approaches.

However, innovation in oncology cannot be measured only by the availability of new therapies. Its impact depends on whether patients are diagnosed appropriately, referred in time and supported adequately through a complex treatment journey. Improving outcomes will therefore require scientific advances to be accompanied by stronger diagnostics, multidisciplinary care, clinical expertise and patient support. Pfizer's Project Aastha in India is an example of how we help address some key non-medical challenges that patients and caregivers face during the journey of cancer care.

Antimicrobial resistance remains an important focus area for public health. What interventions are most critical to strengthening antimicrobial stewardship in India?

Antimicrobial resistance (AMR) sets in when the bacteria, fungi and other microbes behind common infections stop responding to the medicines designed to treat them meaning infections we manage routinely today could become far harder, or even impossible, to cure. It is a clear example of why healthcare outcomes cannot be improved through medicines alone. We need to strengthen how infections are prevented, diagnosed and treated, bringing infection prevention and control, surveillance, diagnostics and antimicrobial stewardship together.

For hospitals, this means stronger antimicrobial stewardship programmes, better microbiology and diagnostic capabilities, appropriate prescribing and the ability to use surveillance data to inform clinical decisions. Preventing infections is equally important because every infection avoided reduces the need for antimicrobial treatment. Project Parivartan is one example of this approach, focusing on bringing infection prevention and control, surveillance, diagnostics and antimicrobial stewardship

together. It also focuses on ensuring safer patient care environments. The larger lesson is that AMR requires stewardship to become part of routine healthcare delivery rather than remain, a standalone programme.

How do diagnostic stewardship and multidisciplinary collaboration contribute to improving outcomes in critical care settings?

In critical care, diagnosis is often the first and most time-sensitive decision point. Diagnostic stewardship helps ensure that the most appropriate test is chosen for each patient and carried out correctly — from sample collection through to interpretation — without delay. In serious infections, this can directly influence treatment decisions and antimicrobial use. The information from a diagnostic test is most valuable when it is interpreted in clinical context. Bringing together different disciplines can help clinicians consider diagnostic findings alongside the patient's presentation and local resistance patterns. Diagnostic stewardship is therefore not a matter of testing alone but a clinical and organisational discipline that connects diagnostics with antimicrobial stewardship and patient outcomes.

Interpreting diagnostics in context, however, depends on reliable knowledge of how resistance is evolving locally and that is where robust surveillance becomes indispensable. Programmes such as ATLAS (Antimicrobial Testing Leadership and Surveillance), a global AMR surveillance database freely accessible to healthcare professionals, track resistance and susceptibility patterns, including species-level and genotypic profiling of key pathogens, helping ensure diagnostic findings translate into timely, resistance-informed treatment. Complementing these efforts, Pfizer's OPEN AMR initiative focuses on equipping nurses and frontline healthcare workers with the knowledge and skills needed to strengthen antimicrobial stewardship and infection prevention practices at the point of care, ultimately supporting better patient outcomes.

How is Pfizer advancing scientific innovation across its priority therapeutic areas to support better patient care in India?

For us, scientific innovation only becomes truly meaningful when it reaches the patients who need it and changes their lives for the better. At Pfizer, this means bringing together scientific research, clinical evidence and real-world insight, and working closely with healthcare professionals to understand where advances in science can have the greatest impact. This spans areas such as oncology, vaccines, rare diseases and infectious diseases.

Beyond what Pfizer delivers, an important aspect for us is enabling innovation to scale. The Pfizer INDovation programme now supports over 40 MedTech startups that are bringing frugal, last-mile innovations that can be deployed at scale and improve access, detection, diagnosis and treatment of a range of diseases.

I also believe that innovation must be viewed through the patient journey. Advances in treatment need to go hand in hand with earlier diagnosis, appropriate referral and informed clinical decision-making. The real measure of scientific progress is therefore not simply whether we have a new technology or treatment, but whether we can use it appropriately to help patients achieve better outcomes.

How is Pfizer partnering with clinicians and healthcare institutions to strengthen medical education and knowledge exchange?

Healthcare professionals are central to translating scientific advances into evidence-based clinical practice. As trusted partners in the patient's care journey, it is essential that practitioners and institutions receive timely, accurate and balanced medical information, real-world evidence and scientific data — on the basis of which they can guide patients to appropriate care.

Our Medical Affairs team works closely with the clinical community to make hospitals, clinicians and frontline workers aware, educated and equipped in different therapeutic areas to provide high-quality, evidence-based care for patients. Whether the issue is immunization, AMR, oncology or other areas of emerging science, sustainable change depends on healthcare professionals having access to relevant evidence and opportunities for meaningful scientific dialogue. This is enabled through scientific advisory boards, continuing medical education programmes, disease-awareness initiatives and digital platforms that support timely, two-way exchange between our Medical teams and the wider healthcare community.

India's clinical research ecosystem is also a key cog in the wheel, and a further, complementary channel for scientific knowledge exchange. Pfizer has a dedicated clinical research team in the country and works with a network of study sites across multiple therapeutic areas. In Chennai, Pfizer has one of its largest Research and Development sites with over 250 scientists working on breakthrough discoveries that will ultimately translate into meaningful options for healthcare professionals and patients.

What emerging scientific and healthcare trends will have the greatest impact on clinical practice in India over the next five years?

It is a very interesting time to be in the field of healthcare. In the coming years, I see earlier and more precise diagnosis, precision medicine, novel treatment modalities, data science and the responsible use of artificial intelligence as key developments shaping clinical practice. The intersection of these capabilities could change how disease is identified, patients are classified and treatment decisions are made.

Equally important are the caveats surrounding these developments – adoption should be driven by evidence; biomarkers and molecular diagnostics must be proven to genuinely benefit the specific patients they are used for; AI requires appropriate human-in-the-loop validation and governance; and new technologies need to integrate into real-world care pathways rather than operate as standalone solutions. At Pfizer, we are similarly investing in building internal scientific and digital capabilities, including structured training and governance frameworks, to help our own teams use these tools responsibly and support more informed, evidence-based engagement with healthcare professionals.

India has a distinctive opportunity because of its combination of scientific talent, diverse patient populations, digital capabilities, clinical expertise and growing focus on research infrastructure. Our country can well become a fertile ground for innovation and scalability where the real measure of progress will lie in how these advances accelerate intervention, aid better-informed clinical decisions and more meaningful outcomes for patients.

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