Meeting Report

Asia for beginners: 5 takeaways from my Singapore trip

Martin Kelly
HealthXL, Dublin, Ireland
Correspondence to: Martin Kelly, HealthXL, Dublin, Ireland. Email: martin@healthxl.org.

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For those of you who travel to Asia (or live there) please excuse my novice blog. It’s been a while since I got out of the airport in Singapore which is usually just a brief stop off point en route to Australia (Figure 1).

We landed on Sunday (March 5th) after 16-h travel. Singapore is the only airport I know with a public outdoor swimming pool and gardens. Aside from that—everything works. Spotlessly clean, clear signage, space to walk, seats to sit—nothing too exciting but carefully planned and managed. Just what a tired business traveler needs (Figure 2).

My first brush with the healthcare system was disembarkation; several forms had to be completed to answer questions in relation to Ebola and respiratory disease. The airport ground staff were also busy applying small white devices (turned out to be thermometers) to the foreheads of selected passengers. What looked like a random activity turned out (like much of Singapore) to be highly logical and organized. Further down the walkway, another member of staff with a screen was reviewing a heat map of the passengers to figure out who was red and needed to be tested. That was my introduction on Sunday afternoon to Singapore known as a gateway to SE Asia and a hub for SARS.

First meeting on Monday (March 6th) was breakfast at the hotel. This included food options for just about every nationality (including what looked like deep fried piranha). We navigated the eclectic options and the conversation focused on some of the more notable local digital health opportunities. Seems the trend is even influencing Chinese traditional medicine. One app compares the color of your tongue as a proxy for your wellbeing. Maybe Watson Health with new found experience in images might be interested?

Moving on swiftly, the next meeting was with the author of “Myth Or Magic—The Singapore Healthcare System”—Jeremy Lim. Jeremy provided a fascinating overview of the market. Singapore spends 4% of GDP on health care compared to 17% in the US. An interesting tendency can be also noticed while comparing the needs of Singapore to other SE Asian markets. Indonesia (249 million populations across 8,000+ islands and a GDP per capita of $3,475) compared to Singapore’s population of 5 million who generate a GDP of $55,000 per capita on a 719.1 km² landmass. For context, Singapore is roughly the same size as Andorra while Indonesia is slightly smaller than Saudi Arabia.

Singapore ranks number 3 in the world in terms of Global wealth per capita, behind Qatar and Luxembourg—it’s growth rate is 2.2% compared to Indonesia who experienced growth of 362% between 2000 and 2015. In just about every dimension, including technology, culture, pricing and accesses, they are very different.

During the trip I had the opportunity to get input from many of our HealthXL Members and HealthXL Community. It was excellent to see the views of such a wide diversity of groups and individuals to help us shape our event, the HealthXL Global Gathering in Singapore in November. These included meeting folks from Abbott, Access Health, ASTAR (Government Research), Government Economic Development Board (EDB), Coffee VC (seed fund), Galen Growth Asia (digital health group), EY, Lumen Labs/Met Life, IBM, Medtronic, National University Singapore Enterprises (NUSE), National University Hospital System (NUHS), Tucker Medical and Philips (Figure 3). Unfortunately schedules where tight so didn’t get to meet some of our other members—BD, J&J, and Novartis—all of whom have significant bases here.

It is clear that the hot topics globally, including population health, aged care and proving outcomes, are top of mind here also. As digital health develops internationally,
it will be interesting to see the role Singapore can play to test easy access for multinationals locally, to act as gateway to SE region, and to carve out a niche globally (e.g., diseases with high Asian populations).

My 5 key takeaways:
(I) Smart everything—traffic, telecoms (15 dollars for 4 gb sim), healthcare;
(II) Consumer driven—many Starbucks shops and bland shopping malls;
(III) Integrated and consistent—even the weather is consistent (30’ and heavy);
(IV) International—significant presence of multinational life science and health companies;
(V) Dense and compact—it is the world’s most tightly packed entrepreneurial ecosystem, and a perfect place to study the lengths to which a government can go to support startup colonies (1).

On final observation, I didn’t see one homeless person despite travelling from one side of the country to the other. I did mistake a group of manual workers lying on the ground 1 day, however it turns out they were simply having an outdoor siesta at lunchtime.

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Footnote
Conflicts of Interest: The author has no conflicts of interest to declare.

References
1. All together now. Available online: www.economist.com, Jan 18th 2014.