KPMG

Building a future ready MedTech supply chain for Southeast Asia



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Building a future ready MedTech supply chain for Southeast Asia

SEA: A region of opportunity and structural complexity

Southeast Asia (SEA) is the new growth frontier for the global MedTech industry, with regional markets projected to grow at a CAGR of 9.9 percent between 2026 and 2034[1] as compared to 5.5 percent between 2026 and 2030 globally.[2] With healthcare access expanding rapidly to its 700 million[3] plus population, the region is seeing sustained increases in infrastructure investment, procedural volumes and demand for higher-quality care.[4] Governments across SEA are actively prioritizing healthcare system expansion and MedTech adoption, creating a strong, long-term demand outlook that global MedTech companies cannot ignore.

Many prominent MedTech players are targeting double-digit growth in SEA and preparing to expand manufacturing and distribution as key markets scale. Yet, MedTech penetration remains structurally low, particularly in Tier-2 cities across Indonesia, Vietnam, the Philippines and Thailand, where diagnostics, imaging and interventional devices are still underserved. As expansion of medical services accelerate, these markets are emerging as the next wave of demand, shifting growth beyond capital cities and increasing requirements for broader reach, faster replenishment and stronger after-sales support. Today, this under-penetration highlights both the size of the growth opportunity and the need for supply chains that are more localized and regionally distributed to deliver responsiveness and reliability at scale.

> “Demand for advanced medical technology exists in provincial hospitals, but affordability concerns, smaller patient catchments, and limited implementation capabilities mean adoption often lags behind larger urban centers.”
>
> **Chief Executive Director of a Provincial Public Health Office in a rural province in Thailand.**

By nature, MedTech supply chains are complex and often span global footprints. This complexity is structural and inherent to all product archetypes, including capital equipment, consumables and devices, each requiring distinct supply chain configurations. It is further compounded by multi-tier supplier ecosystems and the need to source and integrate highly specialized materials and components. As a result, MedTech organizations operate highly interconnected, multi-tier and multi-geography networks where tight coordination is essential to ensure quality, regulatory compliance and reliable delivery (Figure 1). In most global markets, this complexity is managed through scale — allowing companies to consolidate volumes, standardize operations and absorb inefficiencies across larger networks.

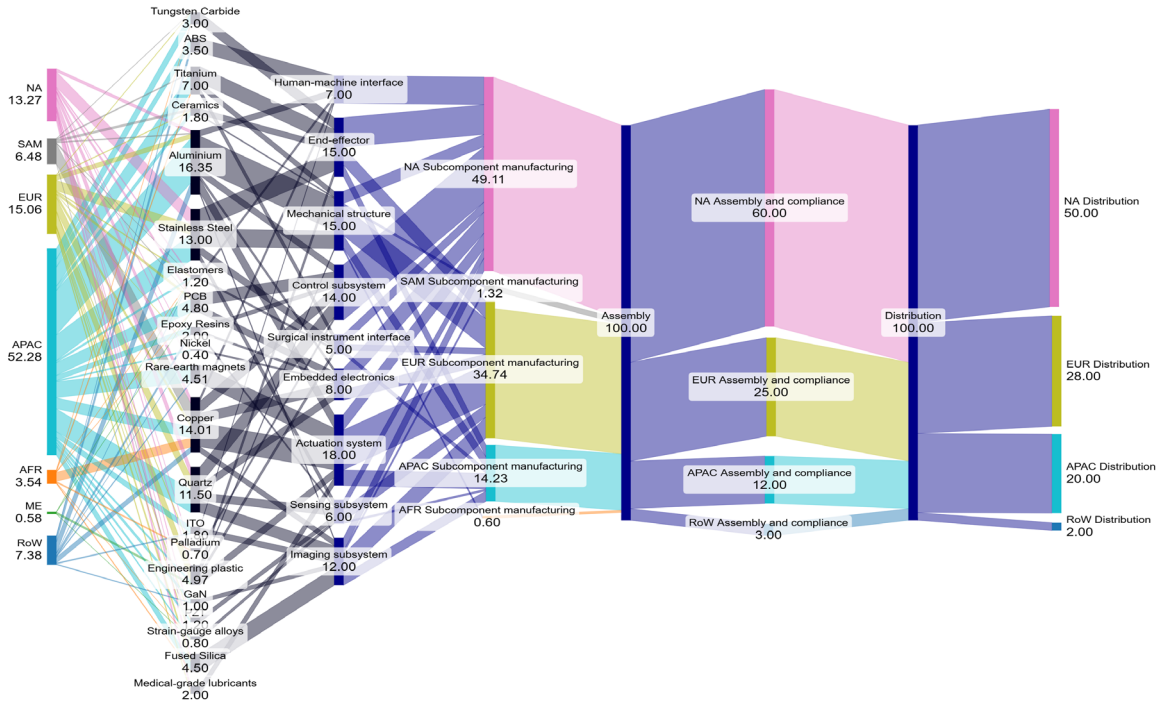
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Figure 1: Illustrative examples of MedTech global supply chains

Capital equipment supply chain

Example: Robotic-assisted surgical system

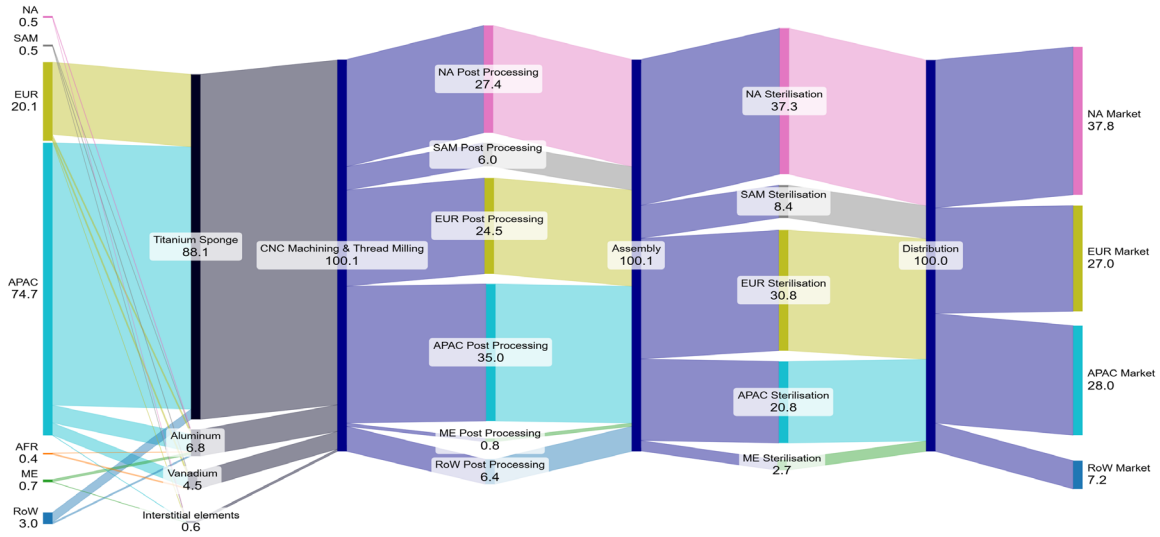
Capital equipment relies on complex technologies, making **assembly a critical step** of the value chain



Implantable product supply chain

Example: Titanium orthopaedic plate

Implant products **rely heavily on raw materials**, where strength, biocompatibility, and durability are critical supply chain priorities



Legend:

North America (NA)	South America (SAM)	Europe (EUR)	Asia Pacific (APAC)	Africa (AFR)
Middle East (ME)	Rest of the world (RoW)	Raw Materials	Manufacturing	

Source: Information was derived from production statistics for key raw materials (e.g. aluminium, steel, titanium, silicon, etc) combined with OEM disclosures and industry reports across subcomponent manufacturing, assembly, testing and distribution activities. Geographic allocations were estimated by applying the proportion of each supply chain stage or material category within the overall product value chain to the corresponding regional production or market share distribution. The values are indicative and intended to illustrate relative geographic distribution rather than exact manufacturing volumes. Remaining assumptions were supplemented by KPMG analysis. Diagram created using SankeyMATIC.

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SEA operates differently. While demand is growing rapidly, it remains fragmented across markets, limiting the ability to apply scale-driven efficiencies and forcing companies into country-by-country operations. This constraint is compounded by regulatory divergence, infrastructure variability and localization requirements, requiring companies to orchestrate globally complex supply chains in an environment where scale is insufficient to simplify them. The result is not just complexity, but unabsorbed complexity, where inefficiencies cannot be diluted and are fully felt across the operating model.

In practice, this manifests in companies adopting inefficient stop-gap measures, such as airfreight and expediting shipping to cope with demand volatility and service gaps across markets. While these measures allow continuity, they raise costs and highlight the underlying issue: the problem is not complexity itself, but the inability to use scale to effectively manage it.



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The scale challenges

MedTech demand in SEA is shifting from episodic to recurring, requiring fast-responding supply chains that can replenish continuously. However, most current MedTech supply chain models are designed for stability within individual markets and not for coordinated growth across a fragmented region. As SEA demand accelerates, these models come under strain, leading to slower responses, higher costs and constrained expansion.

Two reinforcing forces are amplified by limited scale: **internal complexity** that has accumulated over time and **external fragmentation** inherent to the region. If left unaddressed, they can create a structural ceiling on how effectively MedTech organizations can capture value from growth in SEA.

Internal complexity

Supply-chain policies in SEA MedTech are driving significant SKU proliferation and inventory complexity. This constrains operational efficiency and working capital performance. Healthcare spending in the region averages 4.2 percent, well below the global 10 percent,[5] resulting in continued use of legacy products to meet price-sensitive demand.

Furthermore, internal policy choices around product registration, labelling and release across markets fragment the portfolio, with some regional operations managing over 1,000 SKUs according to one supply chain leader interviewed. MedTech companies generally maintain higher inventory levels than companies in other sectors. As portfolios expanded and legacy products continued to be supported, SKU counts and inventory positions grew faster than demand, increasing planning effort, safety stock and cost-to-serve.

> “In several SEA markets, such as Indonesia and Philippines, cost containment pressures continue to shape procurement behaviors, with governments often prioritizing affordability. This resulted in continued use of lower-cost, older-generation SKUs, as well as documented instances of extended or repeated use of single-use medical products.”
>
> **Supply Chain Leader at a MedTech company leading in endoscopy and gastrointestinal imaging**



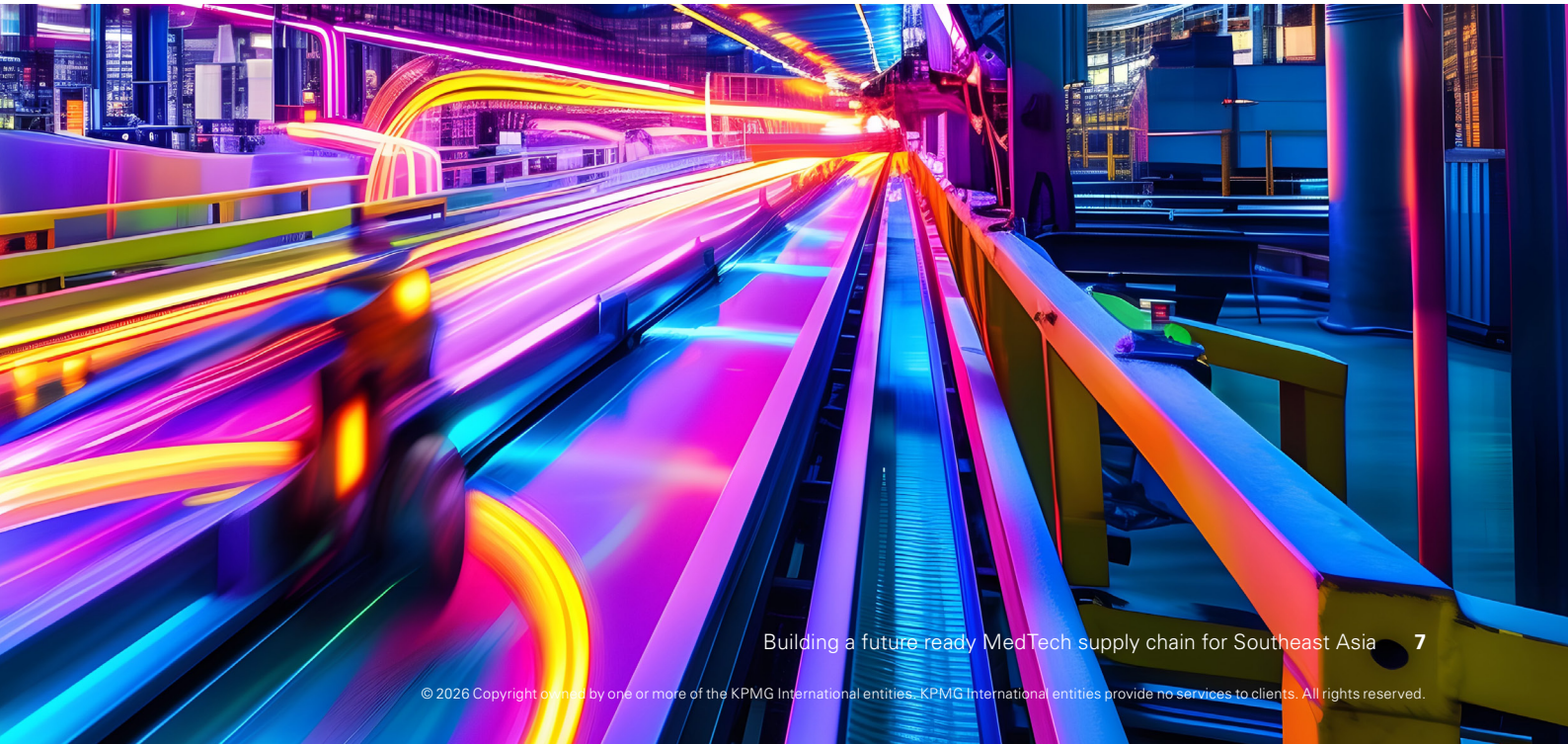
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Limited end-to-end visibility compounds these challenges. Fragmented master data, reliance on distributor-reported demand and disconnected planning systems mean decisions are often based on lagging signals. In SEA, 80 percent of supply chain leaders interviewed by KPMG cited lack of data access as one of their biggest challenges, higher than the 68 percent global benchmark.[6] This results in frequent stock imbalances, reactive supply responses and reduced decision agility. Operations become heavily reliant on expediting, manual overrides and buffer inventory rather than proactive planning and optimization.

> Weak master data and limited transparency restrict our access to true market intelligence … as such, our supply chain is reactive instead of proactive"
>
> **Supply Chain Leader from an aesthetic devices MedTech company**

Distributor-led operating models further amplify complexity. While essential for market access, they introduce execution variability, reduce direct customer control and limit visibility into true demand patterns. In emerging markets, a significant portion of MedTech sales are channeled through distributors, who often provide end-to-end services spanning regulatory approvals, tender management, commercialization and after-sales support. While this supports market entry and coverage, it also makes growth and product launches highly dependent on distributor capability. Inconsistent capabilities across distributors can lead to uneven service levels, slower product launches and inefficiencies in inventory positioning across the region.

> SEA remains fundamentally distributor-led, with capabilities varying widely by market. We lack end-to-end visibility and consistent ways of managing customers"
>
> **Supply Chain Leader from an aesthetic devices MedTech company**



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External fragmentation

Beyond internal design choices, localization pressures across SEA are increasingly reshaping MedTech supply chains and thereby introducing structural complexity into network design. Governments are actively encouraging or requiring local participation through policies such as local content requirements, domestic tender preferences and incentives tied to in-market value creation. For example, Vietnam provides a 7.5–15 percent price preference for locally manufactured devices in public tenders,[7] while Indonesia's Tingkat Komponen Dalam Negeri (TKDN) framework mandates minimum 25 percent local content on products and services.[8] These policies are driving a shift from globally optimized and centralized networks toward hybrid models that combine offshore scale with selective in-market activities. As a result, companies face greater network complexity, with additional manufacturing nodes, regulatory touchpoints, and more segmented product strategies aligned to local pricing and procurement dynamics.

> "Southeast Asia is increasingly shifting towards localized MedTech supply chains, mirroring China's model — where market access is tied to in-country manufacturing. While still nascent, government-driven policies (e.g. tariffs and localization mandates) are making local presence a growing requirement to compete."
>
> **Executive from a leading cardiovascular MedTech company**

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Meanwhile, regulatory fragmentation across SEA limits standardization causing systemic delays in cross-border flows. Products must be adapted and approved separately in each market, as regulatory authorities continue to operate independently with distinct requirements, processes, and timelines. This can create duplication of effort, extend lead times and increase cost-to-serve through rework and inefficiencies. It may also elevate operational risk, particularly for temperature-sensitive or time-critical shipments exposed to prolonged clearance processes. This means scaling across SEA involves duplication rather than standardization, increasing both cost and complexity.

> Small deviations (e.g. incorrect label format or missing symbols) require re-documentation and relabeling of shipments, … resulting in delivery delays"
>
> **Supply chain leader at a MedTech company leading in endoscopy and gastrointestinal imaging**

Combined, these challenges create a compounding effect: internal complexity makes it harder to respond to external fragmentation, while external fragmentation amplifies the impact of internal inefficiencies. This means many MedTech supply chains in SEA reach a breaking point where they participate in growth but are unable to fully capture it. Companies that continue to treat supply chain as a support function will struggle to keep pace with market growth. Those that redesign it as a strategic capability will be better positioned to lead.

These constraints are not new but are becoming more binding as demand rises. Addressing them requires a fundamental redesign of supply chain operating models. Leading MedTech organizations are redesigning supply chains to operate effectively without relying on scale. This involves a dual approach: company-led transformation to simplify internal complexity and strengthen capabilities, alongside industry-level collaboration to address structural barriers such as regulatory fragmentation. Only then can MedTech organizations unlock scale, efficiency and long-term resilience in SEA.

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MedTech Company-led Solutions

Enabling end-to-end supply chain visibility

Leading MedTech companies in SEA are prioritizing end-to-end supply chain visibility using consumption-level data and advanced planning capabilities. This visibility helps deliver more responsive and scalable operations by enabling faster and more aligned decision-making across commercial, supply and finance functions which is critical in a volatile, multi-market environment.

Access to consumption-level data

Direct access to consumption-level data is foundational to improving supply-chain performance. This data is increasingly captured through hospital enterprise resource planning (ERP) and procurement systems,[9] digital ordering platforms and connected medical devices that provide real-time usage insights. By integrating these data sources with ERP, customer relationship management (CRM), inventory systems and distributor networks, organizations can establish a unified data backbone and single source of truth across the supply chain. This creates the foundation for more advanced, analytics-driven planning and enables accurate alignment of supply with actual consumption.

Advance data analytics

Building on this data foundation, leading MedTech companies are investing in advanced analytics capabilities to translate visibility into action. Demand sensing enables a shift from lagging indicators and intuition toward granular, real-time demand signals, improving SKU and market-level visibility and aligning supply with actual consumption rather than forecasts. This reduces stockouts, overstocks and product expiry, freeing up working capital and minimizing write-offs.

Control tower capabilities aggregate end-to-end supply chain data to support proactive decision-making. Such visibility reduces lead times by up to 38 percent through early bottleneck identification, while also reducing reliance on costly expediting processes and improving responsiveness to demand and supply disruptions.[10]

> We are strengthening our supply chain visibility through ongoing scenario planning across SEA markets leveraging predictive demand signals and integrated data to anticipate potential constraints, identify risks earlier and proactively mitigate disruptions before they impact supply."

Supply Chain Leader at a global provider of medical devices, diagnostic solutions and healthcare technologies.

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Integrated Business Planning (IBP) scales these capabilities by aligning demand, supply and financial planning within a single framework, enabling stronger performance across SEA's complex and heterogeneous markets. These capabilities shift supply chains from reactive, buffer-driven models to proactive, insight-driven orchestration.

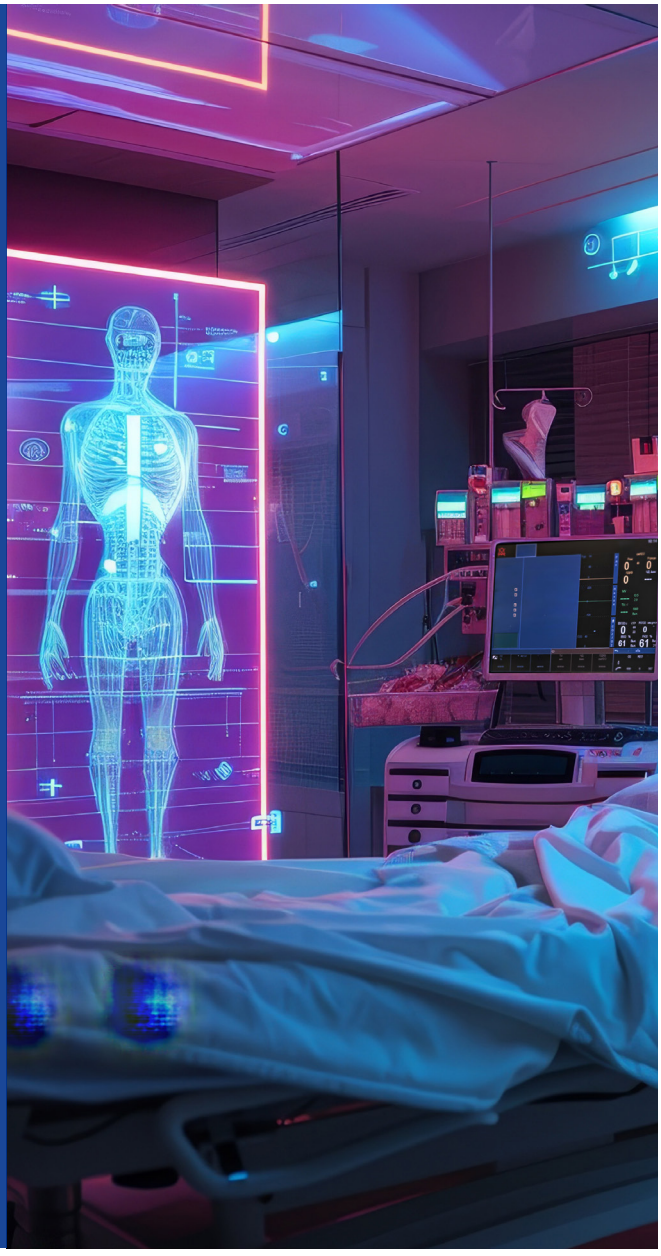
> A key priority for us is improving data quality and system capabilities, as accurate and timely data is fundamental to effective supply chain planning. As we continue implementing Integrated Business Planning (IBP) across markets, we are strengthening our ability to align demand, supply and operational decisions more proactively"

Supply Chain Leader at a MedTech company leading in endoscopy and gastrointestinal imaging.

Case study

Advancing end-to-end supply chain visibility in SEA

A leading cardiovascular MedTech company in SEA is undertaking a digital transformation to enhance end-to-end visibility and responsiveness. The company has implemented a mobile platform used by sales teams, customers and distributors to capture real-time demand signals, improving early detection of demand–supply mismatches. It has also introduced control tower capabilities and is building IBP to better align demand, supply and inventory decisions. However, limited integration with smaller distributors continues to constrain downstream visibility, while fragmented data and manual processes restrict proactive, scenario-based planning. This means that true end-to-end visibility requires not only internal data integration, but also connectivity across ecosystem partners.



Strengthening collaboration across the distributor ecosystem



In a distributor-led SEA landscape, leading MedTech players are shifting from relationship-based arrangements to more structured, performance-driven distributor models. Industry insights highlight that strengthening governance, expanding coverage and building distributor capabilities are critical to creating a resilient and scalable supply chain network across the region.

Governance is the foundation of this shift. MedTech companies can improve visibility and accountability across distributor networks by implementing clear key performance indicators (KPIs), service-level agreements (SLAs) and structured reviews, while reducing execution variability and driving more consistent market performance. Global MedTech companies have started to standardize their governance through a Global Distributor Compliance (GDC) toolkit, embedding defined KPIs, governance structures, and communication channels. Similarly, leading organizations interviewed establish regional governance frameworks covering standardized SLAs, contractual terms, billing, escalation and incentive structures, supported by regular performance management cycles.

Expanding and standardizing coverage is equally important in SEA, where fragmented distributor networks often leave Tier-2 and Tier-3 markets underserved despite strong demand. Introducing distributor certification, minimum operating standards and structured training programs help ensure consistent service quality beyond Tier-1 cities. Leading practices include defining minimum standards across systems, processes and compliance, while building execution readiness through targeted training, particularly for complex portfolios such as Class III devices and hospital-based equipment.

Finally, strengthening distributor capabilities determines whether strategy can be executed effectively at the frontline. Reinforcing execution standards and certification requirements enables more consistent scaling across heterogeneous markets, particularly beyond Tier-1 hubs where infrastructure and expertise vary. For example, Medikabazaar's B2B digital health-tech platform supports medical device and equipment delivery across more than 20,000 Indian pin codes, including Tier-2 and tier-3 hospitals. This is supported by their supply chain in Tier-2 and 3 cities and remote locations, helping address supply-chain gaps in underserved healthcare markets.[11] Companies can further support execution through clearly defined go-to-market models, joint investments and clarified operating roles with distributors, third-party logistics (3PL) and fourth-party logistics (4PL) partners.

By systematically strengthening governance, coverage and capabilities, MedTech companies can reduce variability, expand reach into underserved markets, and build a more dependable and scalable commercial infrastructure across SEA.

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Adopting selective localization instead of full replication

Selective localization replaces the traditional trade-off between scale and market access with a modular approach. Given the region's diversity, operations can be structured as a multi-node network, with each country playing a distinct role (Figure 2). Singapore and Malaysia anchor the region's quality and compliance backbone, forming a time-certain hub, while Thailand, Vietnam, Indonesia and the Philippines provide assembly, sub-assembly and labor capacity to scale. By allocating manufacturing and service activities strategically, companies can run SEA as an integrated network while optimizing cost, service and risk.

A key driver of selective localization is improved access to public healthcare tenders, which increasingly favor suppliers with local presence and value contribution. For instance, a global diagnostic systems manufacturer has partnered with Indonesia's state-owned vaccine manufacturer to localize diagnostics supply and strengthen its position in public health programs and procurement channels. By localizing selected activities such as final assembly, packaging or after-sales support, companies can boost localization scores, expand tender eligibility, and build stronger relationships with public health systems, while selectively meeting local content and regulatory requirements.

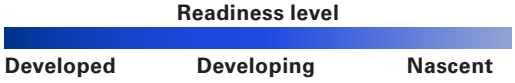
Selective localization also shortens supply chains, reducing lead times and service risk by bringing critical operations closer to end markets. Establishing local hubs for final assembly, testing and servicing enables faster response to demand changes and more agile management of recalls, repairs and maintenance. For example, Philips has established its APAC headquarters in Singapore, integrating operational coordination, digital health monitoring and after-sales service.[12] This improves responsiveness across the region while reducing reliance on centralized, import-led service models.

Beyond near-term operational benefits, selective localization also mitigates structural risks associated with concentrated manufacturing and supply chain networks, which remain exposed to trade restrictions, geopolitical tensions and regulatory disruptions. By distributing selected manufacturing and service capabilities in SEA markets, companies can reduce their dependency on cross-border flows, improve shock resilience, and strengthen alignment with local regulatory and government priorities.

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Figure 2: An overview of SEA MedTech supply chain readiness and competitiveness

		Singapore	Malaysia	Thailand	Vietnam	Indonesia	Philippines
Can We Enter and Stay Compliant Here?	Degree of Regional Trade Access						
	MedTech Manufacturing Regulatory Maturity						
Can We Make and Release Safely?	MedTech Manufacturing Safety						
	MedTech Distribution Compliance						
Can we move Product Reliably?	Degree of Logistics Competence						
	Vessel Turnaround Time						
	Container Movement Efficiency						
	Degree of connectivity with Global MedTech hubs						
Can We staff at the Right Skill and Scale?	Ability to develop, retain, and attract highly skilled talent						
	Education level						
	Size of the Labour Force						
Will the Economics Work Day-to-Day?	Manufacturing land cost						
	Manufacturing Labour cost						
Where can we get Accelerators?	Access to Special Economic Zones						
	Development of MedTech Manufacturing ecosystem						
	Degree of Financial support						
	Degree of Government support						
Will Energy Volatility break the Plan?	Ability to withstand disruptions in global fuel supply						



Source: KPMG Analysis. Factors contributing to heatmap decision include participation in regional free trade agreements such as Comprehensive and Progressive Agreement for Trans-Pacific Partnership (CPTPP) and Regional Comprehensive Economic Partnership (RCEP), maturity of MedTech manufacturing regulatory bodies, ISO 13485 implementation and Good Distribution Practice for Medical Devices (GDPMDS), port and infrastructure development such as World Bank Logistics Performance Index (LPI) ranking, port dwell times, container movement times and Liner shipping bilateral connectivity index (LBCI), IMD World Talent Ranking 2024, tertiary school enrollment and labor force size, industrial land prices and manufacturing labor costs, presence of special economic zones, dedicated MedTech hubs, financial or tax incentives import-related benefits, national investment promotion agencies and share of locally produced oil.

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Collaborative Industry-level Action

Regulatory and trade harmonization across SEA

Building a scalable MedTech regulatory pathway in SEA requires moving beyond fragmented, country-by-country approvals toward greater regional alignment. Today, independent regulatory processes and limited reliance pathways force full submissions in each market, constraining scale. Although frameworks such as the ASEAN Medical Device Directive (AMDD) — with its standardized risk classification and Common Submission Dossier Template (CSDT) — aim to harmonize requirements, implementation varies widely across countries.[13] While companies can optimize submissions, they cannot eliminate duplication. Addressing this requires industry-level coordination to enable SEA-wide reliance frameworks and broader use of standardized dossiers like the CSDT with minimal localization. Together, these shifts would streamline approvals, reduce redundancy and accelerate patient access across the region.

Similarly, trade fragmentation continues to limit regional efficiency, forcing companies into subscale, country-specific supply chain models. While firms can improve logistics and compliance, they cannot bypass these structural barriers. Progress depends on industry-level coordination to enable mutual recognition of certification and quality standards, alongside harmonized customs procedures and documentation — reducing duplication, accelerating cross-border flows and enabling more integrated SEA supply chains.

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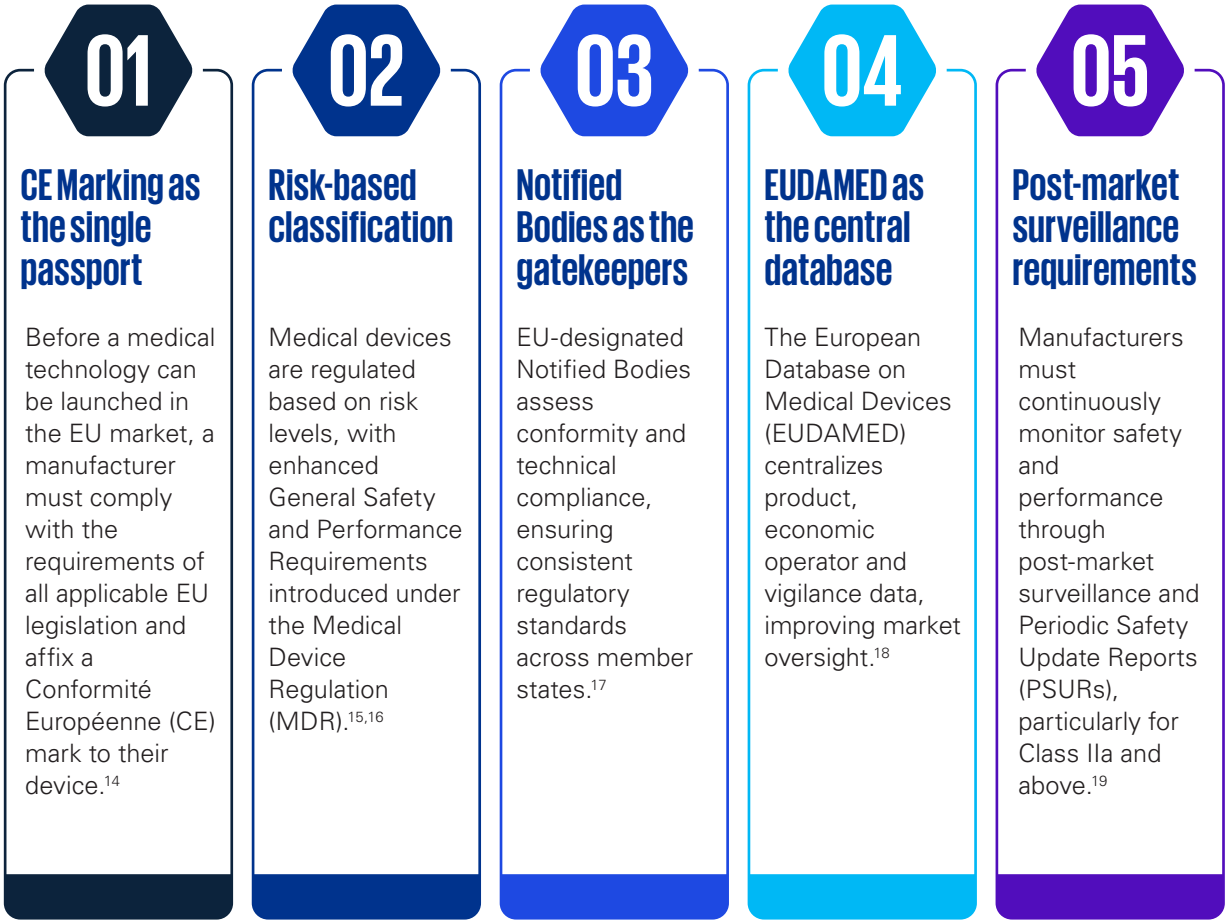
Case study

The European Union's regulatory harmonization

The European Union (EU) illustrates how regulatory harmonization, built on five core pillars (Figure 3), can transform a fragmented set of national markets into a single, scalable commercial and supply chain ecosystem.

At the center of this model is Conformité Européenne (CE) marking, where a single approval provides access across European markets,[20] eliminating duplicate submissions and enabling unified commercial strategies across pricing, branding and distribution.[14] In parallel, the removal of intra-EU trade barriers enables seamless cross-border manufacturing and logistics,[21] allowing companies to optimize supply chain footprints and capture cost efficiencies. Additionally, CE marking also serves as a global benchmark, facilitating entry into markets that reference EU standards.[22] Moreover, harmonized traceability and surveillance frameworks strengthen product safety, recall management and stakeholder trust.[23] These elements show how coordinated regulation can unlock scale, efficiency and competitiveness. The EU MedTech market provides a clear blueprint for regions such as SEA seeking to move from fragmented to integrated market structures.

Figure 3: Five core pillars enabling a unified EU MedTech market

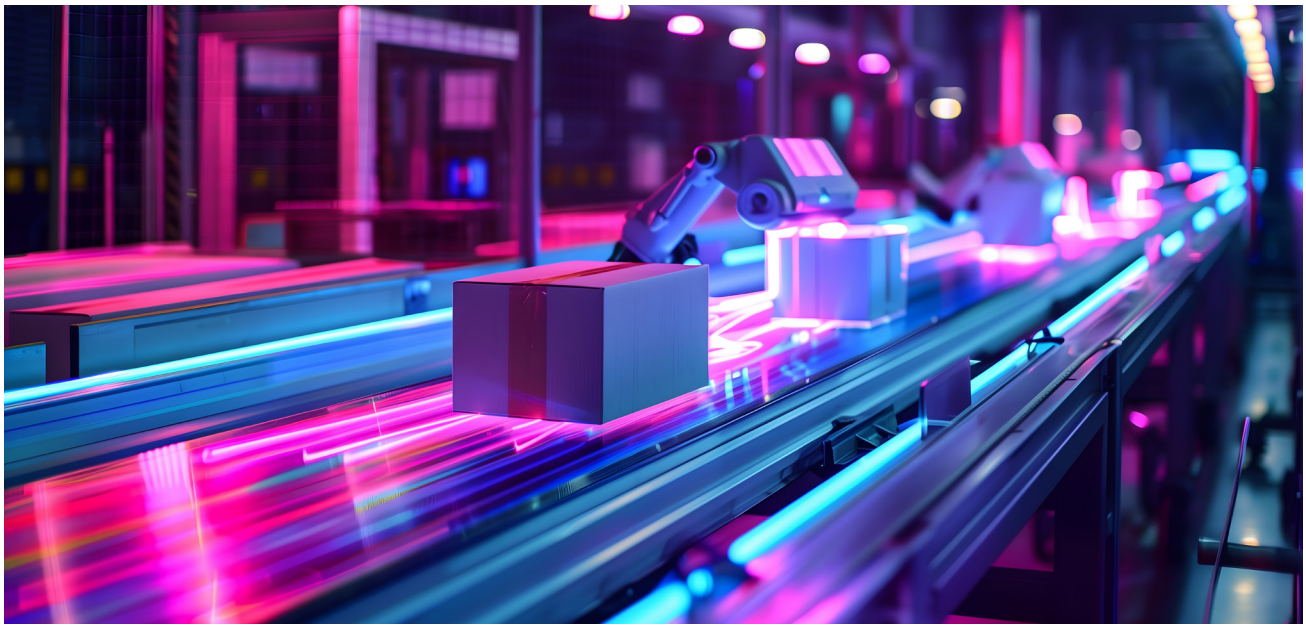


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With a harmonized framework, SEA can transition from fragmented, country-level markets to a more integrated regional platform. As outlined in Figure 4, this involves four structural shifts: regulatory alignment, streamline approval pathway, unified regional markets and harmonized trade flows. These changes unlock exponential scale benefits — lowering costs, accelerating approvals and enabling faster innovation diffusion across markets. In turn, this supports earlier capture of latent demand while strengthening regional supply networks, enhancing resilience, supply security and cost efficiency.

Figure 4: Four structural shifts to an integrated SEA MedTech market

	Regulatory alignment	Streamline approval pathway	Unified regional markets	Harmonized trade and supply chain flows
Structural shift	Moves from fragmented, sequential national approvals to streamlined, reliance-based pathways, eliminating duplication and unlocking faster, region-wide market access.	Aligns regulatory standards and reliance pathways across markets for faster patient access to innovation.	Transitions from individual national markets to a unified regional commercial market to expand addressable market.	Standardized import/export, certification, and quality requirements for supply chain efficiency and regional resilience.
Potential benefits	**Delivers cost savings** Intra-EU costs were ~19 percent lower than those for trade between non-EU countries.[24] **Compresses approval timeline significantly** Cross-border reliance pathways between Singapore's Health Sciences Authority (HSA) and Malaysia's Medical Device Authority (MDA) reduces duplicative reviews, enabling review-time reductions of up to 30 working days.[25]	**Reduces "device lag"** which is primarily a regulatory coordination issue, not a technology constraint.[26]	**Unlocks access to larger patient pool** EU increases MedTech access to 450 million consumers under unified framework.[27]	**Enables cross-border sourcing of components and raw materials** as observed in EU.[14]



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Conclusion

As SEA continues to emerge as a critical growth frontier for the global MedTech industry, supply chain leaders must cope with the region's structural realities. This includes distributor-led commercial models, regulatory fragmentation and increasing localization pressures. To succeed, organizations must fundamentally redesign how supply chains are orchestrated across markets.

This paper outlines key imperatives for MedTech companies and the industry to scale effectively in SEA.

MedTech companies:

Build end-to-end visibility

by establishing a unified data backbone that connects consumption insights, distributor networks and internal systems, enabling real time demand sensing and coordinated decision making

Strengthen the distributor ecosystem

by shifting to structured, performance driven partnerships with clear governance, expanded coverage and upgraded capabilities.

Design selective localization networks

through a multi-node regional model that balances global scale with local responsiveness across manufacturing, assembly and service.

Industry-wide:

Drive collaborative industry-level action

to advance regulatory harmonization, enable reliance pathways and reduce trade fragmentation, unlocking SEA's full potential.

KPMG advises MedTech organizations and ecosystem stakeholders across SEA to translate strategy into execution where supply chains are built for scale, resilience and regional complexity. Combining deep sector expertise with local market insight, we support end-to-end transformation from operating model design and digital visibility to distributor ecosystems and selective localization.

Collectively, we can shape the region's future and build a resilient, connected MedTech supply chain ecosystem that will define both growth and effective MedTech access across SEA.

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Endnotes

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Contacts

Sari Mackay
National Sector Leader, Industrial Markets
Lead Partner, National Supply Chain Advisory
KPMG Australia
E: sarimackay@kpmg.com.au

Guillaume Sachet
Head of Healthcare & Life Sciences
KPMG in Singapore
E: gsachet@kpmg.com.sg

Dr Kamonlawan Chomchopbun
Manager, Healthcare & Life Sciences
KPMG in Singapore
E: kamonlawanc@kpmg.com.sg



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