

The 2025-2030 World Outlook for Postpartum Hemorrhage Treatment Devices

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Abstracts

This study covers the world outlook for postpartum hemorrhage treatment devices across more than 190 countries. For each year reported, estimates are given for the latent demand, or potential industry earnings (P.I.E.), for the country in question (in millions of U.S. dollars), the percent share the country is of the region, and of the globe. These comparative benchmarks allow the reader to quickly gauge a country vis-à-vis others. Using econometric models which project fundamental economic dynamics within each country and across countries, latent demand estimates are created. This report does not discuss the specific players in the market serving the latent demand, nor specific details at the product level. The study also does not consider short-term cyclicalities that might affect realized sales. The study, therefore, is strategic in nature, taking an aggregate and long-run view, irrespective of the players or products involved.

In this report we define the sales of postpartum hemorrhage treatment devices as including all commonly understood products falling within this broad category, such as medical devices such as non-pneumatic anti-shock garments (NASG), uniject prefilled injection systems, and uterine balloon tamponades and foley and condom catheter devices, irrespective of product packaging, formulation, size, or form. Companies participating in this industry include C.R. Bard, Cook Medical, Program for Appropriate Technology in Health, Teleflex, Utah Medical Products, and ZOEX. In addition to the sources indicated, additional information available to the public via news and/or press releases published by players in the industry was considered in defining and calibrating this category. All figures are in a common currency (U.S. dollars, millions) and are not adjusted for inflation (i.e., they are current values). Exchange rates used to convert to U.S. dollars are averages for the year in question. Future exchange rates are assumed to be constant in the future at the current level (the average of the year of this publication's release in 2024).



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