

Asia-Pacific Healthcare Systems Face Growing Pressure to Modernise Digital Infrastructure

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Healthcare leaders at the Philips APAC Innovation Summit highlighted the need for stronger hospital information systems, wider digital health adoption, improved clinical workflows, and deeper collaboration across hospitals, technology providers, research bodies, and AI developers.



Healthcare systems across Asia-Pacific are entering a new phase of digital transformation, as hospitals face rising pressure from ageing populations, resource constraints, legacy infrastructure, and growing demand for more efficient models of care.

In interviews with MedTech Spectrum, Prof Aurel K. Qian, HIMSS Asia Pacific Advisory Board Member, and Sharad Jhingan, Head of Hospital Patient Monitoring and Ambulatory Care for Asia Pacific at Philips, highlighted two connected priorities for the region: upgrading hospital digital infrastructure and ensuring that new technologies translate into measurable workflow and care delivery improvements.

Prof Qian said many hospitals in Asia-Pacific continue to operate with outdated hospital information systems that no longer adequately support hospital management or patient care delivery. According to him, while China has already moved through an earlier phase of digital infrastructure renewal, many healthcare systems in the wider region are still assessing how to replace older platforms and move toward more advanced, lower-barrier systems.

She noted that some markets may have an opportunity to move directly from earlier-generation systems to more advanced digital infrastructure, rather than following every intermediate step. This could help reduce cost burdens while allowing hospitals to build systems that are better suited for current and future care delivery needs.

Beyond infrastructure, Prof Qian identified education and behavioural change as important factors in digital health adoption. She said clinicians, patients, and older populations will need support in building trust with digital tools, including AI-enabled assistants and digital interfaces. In his view, familiarity and repeated interaction will be central to building confidence in these technologies.

The operational challenges described by Prof Qian were echoed in Sharad Jhingan's comments on patient monitoring and ambulatory care. Jhingan mentioned Philips works with leading hospitals across Asia-Pacific, including in Singapore, with a focus not only on installing technologies but also on improving outcomes and workflow efficiency.

One area of focus is the automation of patient data flow into electronic medical records. By reducing the need for nurses to manually record information, such systems can help redirect clinical time toward patient care. Jhingan also cited work with hospitals to reduce alarm burden, with examples where nursing workload related to monitoring alarms has decreased by at least 25 to 30 per cent.

The demand for such solutions is being shaped by demographic and clinical trends. Jhingan pointed to Singapore's ageing population as an example of how hospitals are managing more patients with finite resources. As patients present with more comorbidities and higher clinical complexity, hospitals are under pressure to improve efficiency while maintaining quality of care.

Both interviews pointed to collaboration as a central requirement for the next stage of healthcare digitalisation. Jhingan said future progress will require research bodies, startups developing AI algorithms, technology providers, and hospitals to work together. The aim is to integrate AI algorithms more tightly into medical devices and clinical workflows, subject to regulatory clearances, so that clinicians can access more predictive and actionable information at the point of care.

The broader direction for Asia-Pacific healthcare is therefore not only about adopting more digital tools, but about aligning infrastructure, clinical workflow, workforce education, and regulatory readiness. As hospitals modernise, the success of digital health and AI adoption will depend on whether these technologies can be embedded into everyday care delivery in a way that is practical, trusted, and operationally sustainable.