PharmAsia Pharmacy Enterprise.
Looking for Pharmaceutical Market Ressources.

Drugs are duplicated, at the patient level, from mouth of one to ear of other: as $y_i \to y_{i+k}$. We decompose drugs in prescription classes in regard to history of duplication. At some point, after drugs are selected from many classes, we are not in expectancy to come back to primitive classes. We define a group of prescriptions as an ordered set: *group of prescriptions* $\langle y_1, y_2, .. y_m \rangle = G_i$. There are 50 known classes. (Pharmacokinetics)

Complements to each consumer i **are seen as** $C_i = \langle y_b, \{y_{b+d_i}\} \rangle$. **These complements relate to patient** i, **as** $G_i \pm \{C_i\}$. **The** $\{C_i\}$ **do not vary with the adjacent consumer**, **that is**, **it is not a pattern**. **For patient pattern options**, **we have the pattern of drug Exemption Option by the presence of correction**, (**and calculation of affliction as** $C_k - \{y_n, y_{n+l}\}$), **and are as a total a feature of community sale pattern also** (**of** m **elements of** G_i).

Patient for patient **drug exemption option** is defined as: a search in national drug and food schedule as medication and food is sold one after another and interfere. The national stake is interference (as sets) from suites of drugs that have been bought and drugs bought as from extreme patterns of buyers in society. We determine precisely a periodic existence of purchase of drugs as C_k.

The pharmaceutical companies also want to sell drugs.

There are actors as: engagement of the pharmacist, western syndicates, retail interest of the pharmaceutical company, and individual use pattern in the society of countries as in Asia, in front of distribution of drugs and good drug administration. There is a growing integration policy for drugs in the Western countries. This is not a registered company, and looks for partnerships with pharmaceutics and pharmacists under contract with limited liability.

Limitations.

How to find a network ? (as from Pharmacists Pharmaceuticals and Medics)
Is there a bond in the Pharmas ?

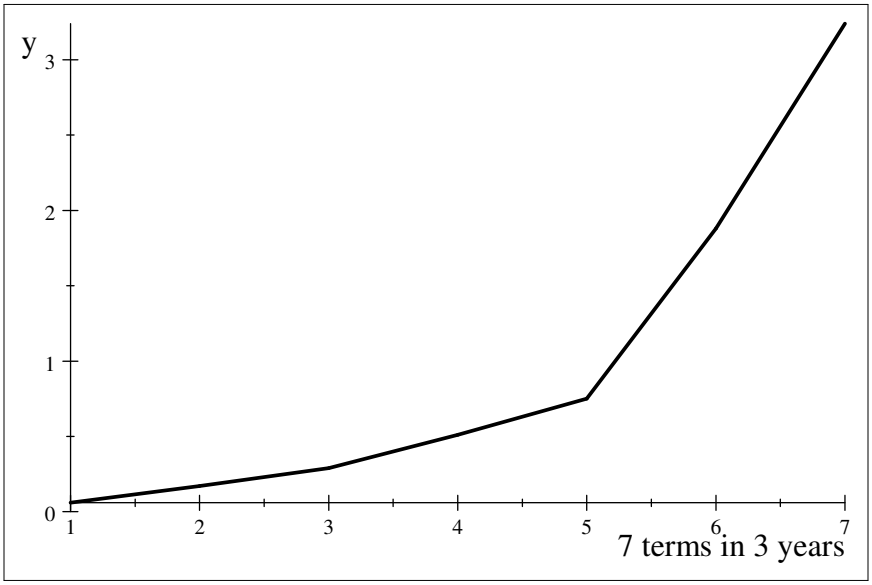
Define employee for groups of prescription at the pharmaceutical companies.
(they exist and are available)
Cross Data in Pharmaceutical's company for its relationship with physicians.
(pharmacopoeia)
Position the Prescription Complement Health Pattern Device
for unique sale of drug in a common supervised situation.
Link with Asian colleagues.
How to edit liaison with companies, syndicates, pharma, facilitators and pharmacists.
Address the Syndicate.

Flow of Investment Revenue.

Money comes from complement (and drug) service sales as 1. a service for medics and pharmaceutical 2. pharmacists and 3. healers in return as from a service. This is a business to business sale. There is also a product sold to the local healer in Asia (the Intervention software).

We approximate an experience of 3 events by $g(x) = \sqrt[3]{x}$ in x years and $g(x)$ in millions. For the next $x = 3$ years we have the gain: $\int_0^3 \sqrt[3]{x}\,dx =: 3.2451$ millions. (expected for the 3 years, at the end of $x = 3$ years). $\int_0^2 \sqrt[3]{x}\,dx : 1.8899$, $\int_0^1 \sqrt[3]{x}\,dx : 0.75$, $\int_0^{\frac{3}{4}} \sqrt[3]{x}\,dx : 0.51107$, $\int_0^{\frac{1}{2}} \sqrt[3]{x}\,dx : 0.29764$, $\int_0^{\frac{1}{3}} \sqrt[3]{x}\,dx : 0.17334$, $\int_0^{\frac{1}{6}} \sqrt[3]{x}\,dx : 0.06879$

The growth project for 7 terms in 3 years are: $\left\| \begin{matrix} \frac{1}{6} & 0.06 \\ \frac{1}{3} & 0.17 \\ \frac{1}{2} & 0.29 \\ \frac{3}{4} & 0.51 \\ 1 & 0.75 \\ 2 & 1.88 \\ 3 & 3.24 \end{matrix} \right\|$ where 0.06 is \$60,000



Early Operation Costs.

The main initial spending is in;

1 the relation to the medics and syndicates (a time investment paid hourly at \$20 for 6 months) and

2.a time investment for ordering sales and existing lists for Asia. Both expenditures are done in collaboration with the pharmaceutical companies as $\max(\frac{1}{t}\cos t) \cdot 20 \cdot 6 \cdot 4$ (for 4 weeks in a month). The function is maximal when $t = 6.1$ or 12.5 or 18.9

$\frac{600}{6.1}\cos 6.1 = 96.715$, $\frac{600}{12.5}\cos 12.5 = 47.894$, $\frac{600}{18.9}\cos 18.9 = 31.706$ indicating satisfaction after 20 weeks. Past this we reach saturation.

For the medics and the syndicates, we have: a spending of $\frac{\cos(t)}{t}480 + \frac{500}{t}$ dealing a $t \geq 4$ (seen from plot) for positivity. The costs are from the 4 month ahead. For the salaries, the total is 480% •months+direct non-periodic costs. These non periodic costs are the $\frac{500}{t}$. As before passed the 20 weeks, the medic and syndicate reaches saturation, and we are satisfied as convergence.

For the investment in prescription groups and ordering existing lists, we have 2 units of 2 weeks, and study would grow from $600 \to 3 \cdot 600 = 1800$ for a half year span. $q(0) = 600$ and $q(2) = 1800$

$\frac{dy}{dx}cy$ lead to $600e^{4c}$ for $t = 4$, and $y' = 2\sqrt[2]{x}$, with the exact solution as: $\left\{C + \frac{4}{3}x^{\frac{3}{2}}\right\}$ We have $\frac{4}{3}(4)^{\frac{3}{2}} = \frac{32}{3}$

Therefore, for a half year we have a relationship with pharmaceutics at $\frac{32}{3}600 = 6400\$ \cdot 5\text{employees} \cdot 2 \to 64000\$$ for an employee yearly (and there are 5 jobs year long) and the pharmaceutical company may contribute to the listing at will.