

Don't run the same race

Dr Sonit Handa — founder and CEO of Biovance Consulting — on trading medicine for biomedical engineering for an MBA, discovering his Ikigai along the way, and why rare disease patients remain healthcare's most underserved population.

Sonit Handa trained as a physician in India, in a system where nearly everyone around him was chasing the same two outcomes: OBGYN or internal medicine. He didn't dislike medicine. He disliked the race. A stint training medical transcriptionists showed him technology touching healthcare from the outside, which was enough to send him to the US to study Biomedical Engineering instead — the first of several moves that had nothing to do with a five-year plan and everything to do with refusing to run where everyone else was already running.

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You don't have to compete in the same race that everybody else has decided is the race.

— Sonit Handa, on Pharma Prescribed

Medicine, then engineering, then an MBA

At St Jude Children's Research Hospital, Sonit built the electronic inventory for a 25-year-old tissue bank that had none — his first encounter with the term GUI. From there, an MBA at Duke's Fuqua School of Business, funded by a loan rather than a scholarship, taken while married with a young family. The common thread across medicine, engineering and business wasn't a career plan. It was a Venn diagram he only had a name for years later: Ikigai — what you love, what you're good at, and what the world will pay for.

Rare disease is where the system shows its limits

Ten to fifteen years and millions of dollars to develop a drug that may only reach a handful of patients — and that's before geography enters the picture. Sonit is blunt about what happens next: reimbursement varies by country, and patients in under-resourced parts of the world may not even have a name for what they have, let alone access to treatment for it. The ethical dilemma he describes isn't abstract. It's the gap between training as a physician to help one patient at a time, and working in an industry built to scale that help unevenly.

Change management is a leadership behaviour, not an HR function

Sonit's view: no organisation-wide change survives on a memo. It starts with leadership visibly repeating why the change is needed, continues through their own demonstrated behaviour, and only works when individual concerns are heard rather than overridden. A single framework handed to one function, he found, only becomes real practice once senior leadership buys in and the people who'll live with it help build it. Giving someone a framework and embedding a new way of working are two different jobs.

QUICKFIRE ROUND

Advice to his younger self: "Don't worry, things will work out. You will not know what exactly is going to happen, but when you reach the other side, you will see that all the dots connected."

Top qualities for building a team: Trust, transparency, and knowing each other's strengths and weaknesses well enough to complement them.

Favourite thing outside work: Working out, and time with his wife and son. "Health is the true wealth" — a lesson from his father that took him years to actually believe.

Golden rule, in life and business: Keep learning, be open to possibilities. Even a simple, small idea could turn into a huge accomplishment.



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Dr Sonit Handa is founder and CEO of Biovance Consulting, helping biopharma leaders align strategy and execution across global launches, operating model transformations and post-merger integrations.