

Medical tourism: Global and Indian perspective

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Introduction

What is medical tourism?

- Medical tourism is the process of traveling to a distant location to obtain general medical, dental , or cosmetic surgery at a higher value (quality divided by cost) than is commonly available in one's own local system.

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- Medical tourism can be sub-divided into domestic and international.
- Domestic medical tourism refers to patients traveling within their own country to receive care at a 'center of excellence' (COE) – e.g., institutions with large patient volumes and documented quality outcomes (e.g., University of Pittsburgh Medical Center for transplantation), or those that enjoy this status via common public recognition (e.g., Mayo Clinic , Cleveland Clinic).

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- International medical tourism refers to traveling outside of one's country (sometimes to an international COE) to obtain care at significantly reduced cost or (for those traveling to more modern countries) increased quality.
- Owing to the rising cost of healthcare and health insurance to access that healthcare, such cost savings have become more attractive to the healthcare consumer.

History of medical tourism

- Medical tourism dates back thousands of years to when Greek pilgrims traveled from all over the Mediterranean to the small territory in the Saronic Gulf called Epidaurus. Epidaurus became the original travel destination for medical tourism.
- Spa towns and sanitarium were the form of early medical tourism. People traveled to these destinations for medical benefits. From the 18th century wealthy Europeans travelled to spas from Germany to the Nile.

History of medical tourism

- Early the 16th century, Europe became a destination for medical tourism, due to roman baths or spa.
- In the 1900, USA and Europe became medical centers of major interest, but only for rich persons who had the possibility to travel in order to take care of their health.
- In the 80's –90's travels for aesthetic surgical procedures and dentistry appeared. These tourists were attracted by medical tourism especially due to low costs, taking into consideration that in their countries these services were not covered by insurance policies

Why do patients go abroad?

- ***Affordable*** is probably the major reason and this is particularly true for patients from the well-off, developed countries like America and UK, where private health care is expensive, and some surgeries are not covered by their insurance.
- ***Available*** is often because the medical treatment they need is not available in their local areas or not trusted by the patients, as is often the case with Omani patients.

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- ***Accessible*** applies more particularly to patients from countries where the waiting list is long, particularly to national health service patients in the UK and in Canada.
- ***Acceptable*** applies to services, which may be affordable, available, and accessible, but they are not acceptable in the patient's own country for religious, political reasons or other social reasons.

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- ***Additional*** refers to the availability of better care, perhaps better technology, or a better specialist, or simply better service and personalized care abroad compared to care in the home country.

Cost of procedure in different countries

Country	Heart bypass US \$
India	7000
USA	1,33,000
Thailand	22,000
Mexico	27,000

Cost savings

- Using US costs across a variety of specialties and procedures as a benchmark, average range of savings for the most-traveled destinations:
- India: 65-90%
- Thailand: 50-75%
- Mexico: 40-65%
- Singapore: 25-40%
- South Korea: 30-45%

Global medical tourism scenario

- Medical Tourism is perceived as one of the fastest growing segment in marketing.
- Medical Tourism is an emerging concept.
- Industry estimates show that the size of medical tourism industry stand between Rs. 1200 core and 1500 crore.

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- A CII Mckincy report says that medical tourism alone can contribute up to Rs. 10,000 crore additional revenue to up market territory hospitals .
- Over all Thailand, Singapore and India are most advance in Medical Tourism.

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- The market size is USD 45.5-72 billion, based on approximately 14 million cross-border patients worldwide spending an average of USD 3,800-6,000 per visit, including medically-related costs, cross-border and local transport, inpatient stay and accommodations.
- Some of the surveys estimate 1,400,000 Americans will travel outside the US for medical care this year (2017).

What are the top destinations?

- India
- Thailand
- Mexico
- Israel
- Malaysia
- Singapore
- South Korea

What are the top specialties for medical travelers?

- Cosmetic surgery
- Dentistry (general, restorative, cosmetic)
- Cardiovascular (angioplasty, CABG, transplants)
- Orthopedics (joint and spine; sports medicine)
- Cancer (often high-acuity or last resort)
- Reproductive (fertility, IVF, women's health)
- Weight loss (LAP-BAND, gastric bypass)
- Scans, tests, health screenings and second opinions.

Top destinations by treatment

Country	Treatment
India	Orthopedics, cardiology
Thailand	Everything especially cosmetic surgery and wellness .
Singapore	Cancer
Mexico	Dentistry,
Israel	IVF/Fertility
South Africa	Cosmetic surgery, Cardiac
Turkey	Vision

Risk exposure to medical tourists

Three broad categories have been identified:

- risk of travel,
- risk post-operative procedure
- risk that might affect the health of patients during the procedure.

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Risks of travel:

- Psychologically and emotionally, being away from the closest people such as family, spouse, and parents may lead to acquired stress to medical tourist. Such health risk related to travel is due to the mental burden and particularly during the healing period abroad.
- More susceptible to deep vein thrombosis
- Furthermore, there might be a possibility of pulmonary embolism.

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Risks-during the procedure

- Quality of care
- Infection and cross-border spread of antimicrobial resistance and dangerous pathogens

Risks -post operative

- Follow-up care : Many medical procedures require follow-up care after surgery. However, patients who have traveled abroad for medical procedures may have problems finding US physicians who are willing to provide follow up care after their return.
- Malpractice and liability: In addition to quality of care and follow-up care , many patients are concerned about malpractice ; US citizens perhaps overly so..

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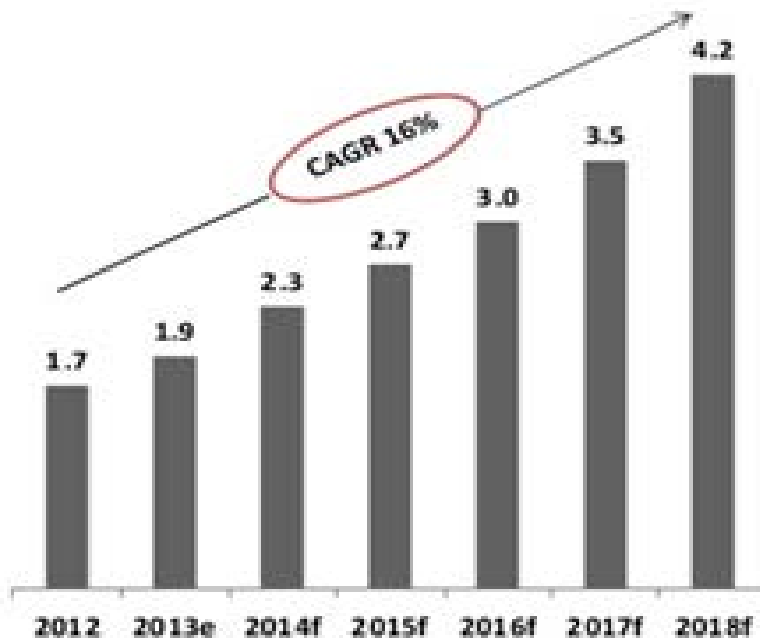
Patients are also concerned about who they can sue should something go wrong. Some researchers are concerned that patients do not fully appreciate the legal risks they incur in medical travel and will likely struggle to obtain adequate compensation for any injury sustained abroad.

Why India?

- Low Cost
- Availability Of Medical Experts
- Availability Of Advanced Equipment's
- No Waiting Time
- Specialty Treatment

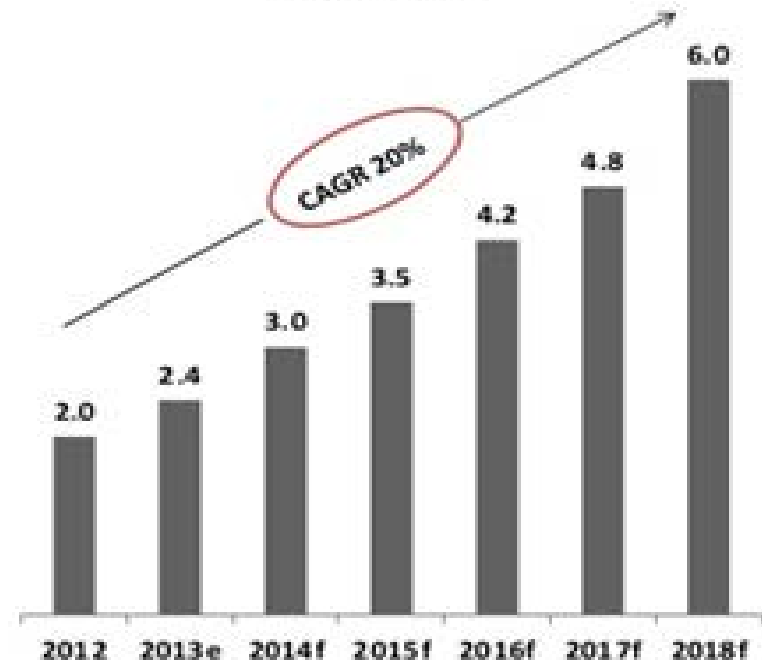
Health Tourism: Destination India

India - Medical Tourist Arrival (Lakhs), 2012-2018



Source: Ministry of Tourism (Bureau of Immigration, India), RNCOS; Note: e/f = RNCOS Estimation/Forecast

India - Medical Tourism Industry (Billion US\$), 2012-2018



Source: Confederation of Indian Industry, RNCOS
Note: f = RNCOS Forecast
The figures correspond to the entire Indian medical tourism industry

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- In total in 2015-2016 **Indian hospitals had 460,000 international patients** - while medical visa figures were less than half of that. It is hard to be precise, as medical visa figures tend to be by calendar year compared to the financial year figures that the report uses.
- While **one in three foreign patients in Indian hospitals were from Bangladesh**, at 165,000 - only 58,300 of these were true medical tourists on a medical visa.

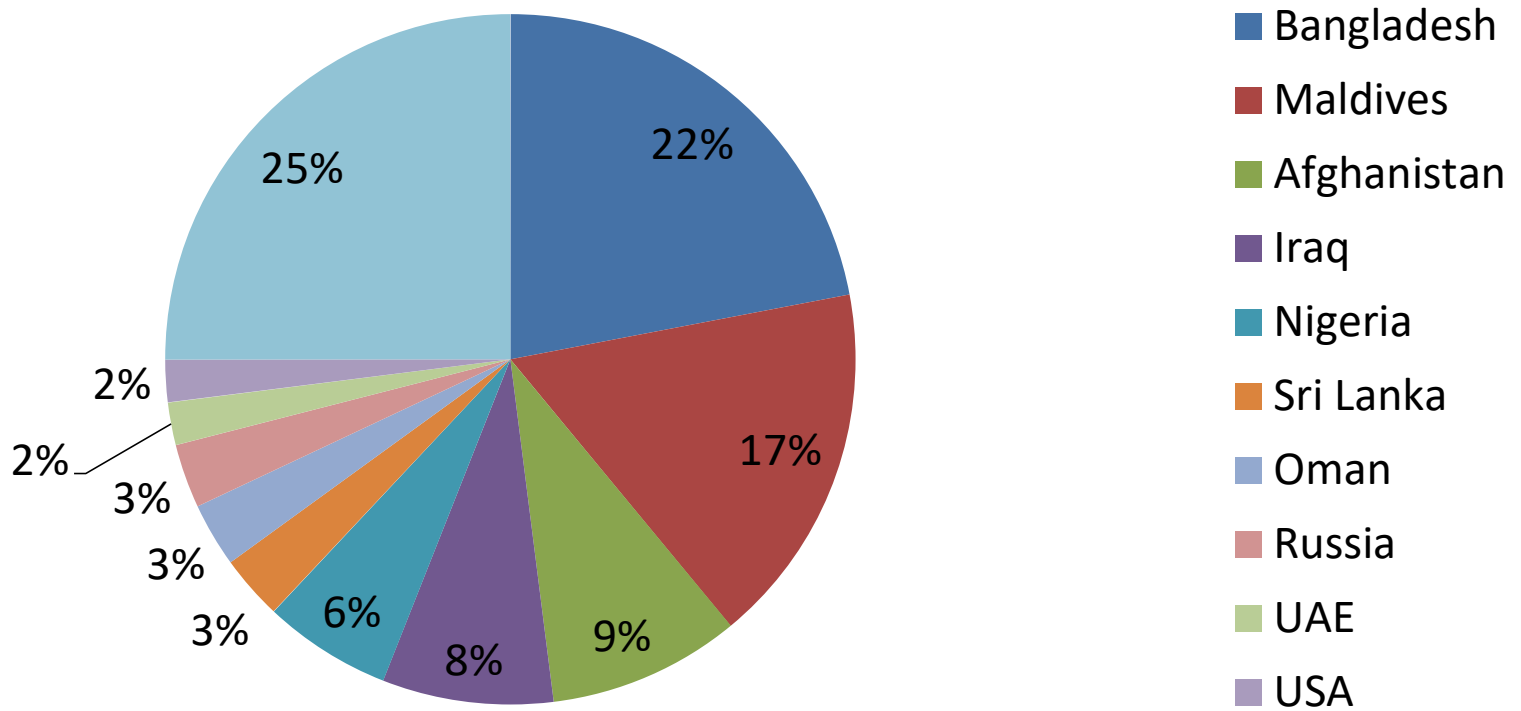
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Other top nations for medical visas

- Afghanistan: 29,492
- Iraq: 9,131
- Nigeria: 5,994
- Kenya: 3,240
- Pakistan: 1,921

Country wise breakup of medical tourists in India

Percentage of Medical Tourists



SWOT analysis of medical tourism in India

Strengths:

- Indian doctors are recognized as amongst the best at international levels; skillful, qualified, share information with patients and are readily available, whenever required.
- High quality treatment in low cost.
- Medical technology, equipment, facilities and infrastructure are at par with international standards.

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- Doctors and staff are good at English which makes it comfortable for tourists from English speaking countries.
- Because of absence of racial discrimination, customers, especially from Africa, are comfortable in India
- Education system provides 30,000 doctors and nurses each year which support the growing medical sector in India.
- Foreigners are also attracted to Indian Systems of Medicine like Ayurveda, Yoga.

Weakness:

- Though the Cost of treatment is less in India, other costs like accommodation may prove to be inhibitive, especially for customers from low income economies.
- Maximum medical tourist are from non English speaking parts of the world which highlights the need for training of linguists for example specialists of Arabic.
- Accreditation

Opportunities:

- Cost of medical treatment in developed western world remaining high, provides Indian medical tourism sector with a unique opportunity.
- Patients from third world countries, where comparable quality medical care is not available, seek treatment outside their home countries. They compare western service providers with Indian service providers and find Indian medical care cost effective.

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- Employers in US are looking for ways to decrease their employees medical expenses providing appropriate health coverage concurrently. Employers will look for low cost care in India and other Asian countries.
- Insurance companies in western countries are offering full cover and care in home country at a higher premium payment. Insurance companies are offering packages where customers can.

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choose a lower premium but will have to get them treated at hospitals with comparable quality outside the country, with which they have tie-ups. Indian accredited hospitals can choose to compete for a share of this segment

- The medical care facilities in other South Asian countries are also not up to the mark. Patients from these countries find good quality care in neighborhood, where travel time as well as the cultural divide is less.

Threats:

- Cost to the local population-non-availability of services.
- High competition from other Asian countries like Singapore, Thailand, Malaysia etc.

Thank you