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# MEDICAL TOURISM

— LYDIA GAN —

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# Medical Tourism

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# Medical Tourism

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*For Robert and Rea*



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## Series Foreword

Every day, the public is bombarded with information on developments in medicine and health care. Whether it is on the latest techniques in treatment or research or on concerns over public health threats, this information directly affects the lives of people more than almost any other issue. Although there are many sources for understanding these topics—from websites and blogs to newspapers and magazines—students and ordinary citizens often need one resource that makes sense of the complex health and medical issues affecting their daily lives.

The Health and Medical Issues Today series provides just such a one-stop resource for obtaining a solid overview of the most controversial areas of health care in the twenty-first century. Each volume addresses one topic and provides a balanced summary of what is known. These volumes provide an excellent first step for students and laypeople interested in understanding how health care works in our society today.

Each volume is broken into several parts to provide readers and researchers with easy access to the information they need:

Part I provides overview chapters on background information—including chapters on such areas as the historical, scientific, medical, social, and legal issues involved—that a citizen needs to intelligently understand the topic.

Part II provides capsule examinations of the most heated contemporary issues and debates and analyzes in a balanced manner the viewpoints held by various advocates in the debates.

Part III provides case studies that show examples of the concepts discussed in the previous parts.

A directory of resources and a glossary provide additional reference material and serve as the best next step in learning about the topic at hand.

The Health and Medical Issues Today series strives to provide readers with all the information needed to begin making sense of some of the most important debates going on in the world today. The series includes volumes on topics such as stem cell research, obesity, gene therapy, alternative medicine, organ transplantation, and more.



## Preface

What is medical tourism? It is simply an act of traveling outside your country of residence for medical services. It is an industry defined by multifaceted players—the patients or the medical tourists, the destination healthcare facilities, the payers or insurance companies, the agents or middlemen, and everyone in between who is involved in the business one way or another. Chapter 1 reviews these players and their market roles. There are many reasons why one would embark on such a healing journey outside one's home country, as discussed in Chapter 2. Mine has always been a natural and convenient one. After spending nine years teaching at an elite university in Singapore, my family consciously moved back to the United States in 2007. Since then, I have spent every summer traveling and visiting friends and families in Singapore and Malaysia. I must confess that I'm inclined to experiment with various therapies while on vacation, feeling more relaxed. Blessed with a strong US currency, I began undertaking an annual physical examination (popular in that region as a preventive measure) and taking advantage of various affordable treatments such as dental, cosmetic, and even acupuncture while traveling to that part of the world. That was my first taste of medical tourism. As I advanced my research into the fascinating topic of medical tourism, I expanded my summer travel plan each year by stopping over at “halfway” cities, such as Istanbul, Amman, and Johannesburg, to name just a few. The intention was to tour and interview some of those world-class hospitals and, at the same time, take in some local sightseeing. I visited the hospitals for research purposes on numerous occasions, and occasionally, I checked myself in as an outpatient to “test” the local healthcare systems. I find the traveling part fascinating, from watching the bizarre scene of a helicopter landing on the parking lot along with other parked cars in South Africa to getting an ophthalmologic appointment within twelve hours after my plane has landed in Singapore to being placed in front of the line while checked in as an international patient at a healthcare facility in Jerusalem. The experiences, along with their potential adventures, seem endlessly inviting. Before I realized this, I had visited a dozen hospitals in half a dozen countries, and the experience has undoubtedly enriched my research work. My medical tourism experience was from a researcher's or convenient patient's perspective. To me, travel seems to

come first before the medical part. This is undoubtedly quite different from the conventional definition of medical tourism, that is, planning a trip mainly for medical purposes.

Like many across the country, I have lost numerous loved ones to cancer. In the United States, cancer has become the second leading cause of death next to heart disease, and health experts have predicted it will soon catch up with heart disease. Inundated by this fact, I began to research complementary and alternative medicine, particularly in natural cancer treatments. These alternative therapies are discussed in Chapter 3. Complementary and alternative medicine opens a new avenue of exciting research with more promising outcomes than conventional medicine in some cases. It turns out that brand-name US medical centers have already embraced the idea of integrative medicine in the last three decades. It combines conventional and nonconventional approaches to treatment, working together to offer patients the best alternatives, complementing each other's needs or offsetting each other's deficiencies. It provides holistic care for the body, spirit, and mind. The use of acupuncture, essential oils, nutrition, and supplements, among others, have proved to be ideal complementary therapies for cancer patients. While an estimated 50 percent of US teenagers have faced severe mental illnesses, anxiety, and depression at some point in their lives, an increasing number of them were open to wellness approaches such as yoga and meditation to unwind. In the area of interstate medical tourism, the use of medical cannabis holds endless potential for research as well as medical remedies for many who suffer from serious ailments or chronic pains. These are reviewed in the second half of Chapter 6, and their related regulatory and ethical issues are considered in Chapter 9.

It is essential to learn about medical tourism because it is a promising industry with the potential to extend into integrative medicine that is anticipated to serve all ages in the United States and globally. Moreover, it provides a viable medical option for those underinsured or uninsured, those unable to access specific medical procedures or products, and those who value faster access or confidentiality or more personalized care or vacationing opportunities. All are important in terms of consumer and patient sovereignty. Further, it allows Americans to access quality care and relieves the strain on public resources for the sick at home. For those who have never used medical tourism, Chapters 4 and 5 are helpful chapters to get acquainted with who the healthcare providers are and what value-added services the middlemen may provide. Once convinced about making a medical trip, Chapters 7, 8, and the first half of Chapter 9 are excellent reads on patients' concerns, how the insurance companies may be

involved, and deeper issues to consider when things go wrong. Chapter 10 discusses the more significant and long-term impacts of medical tourism on host countries, home countries, and its future trends. Medical tourism raises the gross domestic product of destination countries mainly by improving trickle-down economic development and preventing the external brain drain of healthcare professionals. Most of its impacts on home countries have directly affected the home healthcare systems, politically, socially, and economically, and they do not necessarily affect an individual patient in the immediate short term. Nevertheless, as an informed citizen, one should be aware and care about how this nascent industry may impact one's home country.



# Acknowledgments

I have had the privilege of visiting umpteen world-class hospitals and interviewing their administrators since I started my research work on medical tourism nearly two decades ago. First, I would like to thank Joan Henderson, my then colleague at Nanyang Technological University, Singapore, for her pioneer work on the subject and for introducing me to it; Jim Frederick, for his collaborative work; and David Boucher of Bumrungrad Hospital, Thailand, for his enthusiasm on the subject and his referrals to many of these hospitals.

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Part I

Overview



# The Basics of Medical Tourism

What do surgeon, sea, and sand have in common in white sandy Phuket Island of Thailand? What do a surgeon and safari have in common in South Africa? This chapter defines medical tourism, what it is internationally and domestically, and what it is not. The value and growth of medical tourism will then be estimated from various sources. The detailed historical development of medical tourism will be given—from ancient Greece to the present-day medical hub of Dubai City. Finally, for readers to understand the multifaceted and multiplayer market of medical tourism and how these players engage with one another in the patient's treatment-seeking journey, the model of the four modes of medical tourism will be presented.

## Definition: International and Intranational Medical Tourism

What is medical tourism? There is more than one definition depending on what context it refers to. Other synonymous terms used are medical travel, healthcare outsourcing, globalization of health care, and even health tourism. Regarding the flow of patients geographically, there is an import side and an export side to medical tourism. This book focuses on the import side of medical tourism—the outflow of domestic residents specifically from developed economies to seek medical, dental, and cosmetic surgeries from healthcare providers in developing economies. As a result, there is an outflow of revenues, for instance, from the United States to other countries, thus reducing the value of the gross domestic product (GDP) of the United States. The import side of medical tourism is a stark difference from the export side, wherein there is an influx of residents from less developed or developing countries to developed economies seeking medical treatments. In the United States, such has been the case until September 11, 2001. Once potential patients commit to traveling for care, they sometimes,

though not always, visit some interesting sights in the destination country, therefore the term “medical tourism.” This book focuses more on the “medical” than the “tourism” part, as the former is travel’s primary and intended purpose.

Defined as “medical travel,” it refers to anyone who travels a distance (either out of the country or out of their home states) to seek healing for their bodies. They do not necessarily engage in any form of tourism or sightseeing. On the other hand, “health tourism” is a broader concept embraced predominantly by the European Union. It involves natural and holistic treatments such as spas, thermal springs, yoga, massage, Ayurvedic medicine, and traditional Chinese medicine, including herbs and acupuncture. Many refer to such therapies as “wellness” in the United States. Many European economies embrace this broader concept to the point that their insurance companies reimburse these holistic approaches. A case in point is thermal treatments, which are well recognized in Italy and are included in the therapeutic program of its national health system (Gianfaldoni et al., 2017). Unfortunately, the insurance industry in the United States has not caught up with reimbursing treatments included in “health tourism,” otherwise known as complementary and alternative medicine (CAM). It is comforting to know that the Food and Drug Administration (FDA) in the United States has recently approved chiropractic care and acupuncture as legitimate pain-management therapies since June 2020. These therapies are, therefore, now covered by most insurance companies.

## Value and Growth of Medical Tourism

Regarding the value of global medical tourism, whether internationally or within the United States, various figures have been reported from different sources. According to one source, the global market was valued at \$105 billion in 2019 and is projected to reach \$274 billion by 2027 at a 12.8 percent compound annual growth rate (CAGR) between 2019 and 2027 (Allied Market Research, 2020). In terms of volume, 23 million had traveled worldwide in 2019, with expected growth to 70.3 million by 2027, with a 15 percent CAGR between 2019 and 2027. According to another source, the global medical tourism market was predicted to grow to \$207 billion by 2027 (Matthews & Freund, 2022). The same source also stated that during the pre-pandemic year of 2019, an estimated 780,000 Americans traveled abroad for treatment, compared to 650,000 in 2021. The 2021 figure was an increase of 124 percent from 2020, which was at the beginning of the Covid-19 pandemic year.

Elsewhere outside the United States, as the Covid-19 pandemic of 2020–2 has eased in most parts of the world, medical tourism's growth has been phenomenal. In South Korea, the number of incoming medical tourists has jumped by approximately 70 percent, from 146,000 in 2021 to 248,000 in 2022 (Lee, 2023). Similarly, the number of medical tourists arriving in India has increased by 9.2 percent, from 595,000 in 2019 to 650,000 in 2022, a significant increase from the previous year (Naik, 2023). Dubai is considered one of the top medical tourism hubs in the world. In 2022, the city received 674,000 medical tourists (*Gulf Business*, 2023).

As the values and growth of medical tourism worldwide have demonstrated above, a similar trend is observed in the United States. In 2019 alone, it was reported that the number of Americans who traveled to Mexico for care was at least 1.2 million (O'Neil, 2023). We expect the outflow of Americans to medical tourism destinations besides Mexico to exceed a few million quickly. Healthcare spending in the United States grew by 2.7 percent to \$4.3 trillion between 2021 and 2022, or 18.3 percent of GDP or \$12,914 per person (Center for Medicare and Medicaid Services, 2022). As the cost of US health care continues to rise, as the third-party payers provide less coverage, as the household incomes rise and the population ages, and as there are increasingly vital government initiatives and support from destination economies, the US medical tourism industry is on its definite path to growth.

## Historical Development

One can only fully understand the medical tourism industry by first delving into its history and development. The history of medical tourism dates back thousands of years before Christ, and it was widespread and practiced among different cultures of the world. The ancient Greeks were the first to travel to therapeutic temples, erected and honored after Asclepius, the Greek god of medicine (Health-tourism.com, 2022). Greek pilgrims traveled to these temples, one of the earliest healing centers, searching for a cure for their diseases. Epidaurus was one of the most well-known spa sanctuaries, and it included facilities like a gymnasium, a dream temple, and thermal baths. Other similar ones were the Sanctuary of Zeus in Olympia and the Temple of Delphi. Today, these ruins remain popular tourist spots for sightseeing. Even in India, dating back five thousand years ago, the popularity of yoga and Ayurvedic medicine has attracted travelers and spiritual students to flock to the country to seek