THE PROS AND CONS OF MEDICAL TOURISM

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WHAT IS MEDICAL TOURISM?

Medical Tourism is the process of travelling to a foreign country to obtain treatment. The services sought by the patients travelling generally comprise elective procedures or specialised surgeries such as cardiac surgery, dental surgery, joint replacement and cosmetic surgeries. However, the treatments sought are not limited to this list and medical tourists may also travel abroad to gain access to other healthcare services such as psychiatry and convalescent care. Medical Tourism has become an attractive option for potential economic growth in many countries across the world. Countries that actively promote medical tourism include Belgium, Costa Rica, Cuba, Hungary, India, Jordan, Malaysia, South Africa and Thailand. Global competition is emerging in the health care industry and growing numbers of patients are travelling from developed countries to areas of the world once characterised as “third world”.

WHAT ARE THE REASONS FOR THE GROWTH IN MEDICAL TOURISM?

Cost Savings - The primary motivator to travel abroad for medical treatment is cost. The availability of affordable healthcare is something that particularly appeals to patients who are without medical insurance in their home countries. The savings achieved by the patient will depend on the destination country and the procedure.

High labour costs in developed countries such as the United States drive up the cost of operating hospitals - and this in turn is reflected in the amount charged to the patient. Conversely, the lower operating costs and doctors’ salaries in countries such as India mean that treatment can be offered at more affordable rates.

Accessibility - Waiting lists in some countries for medical procedures, even in the private sector, can be extensive. Short or no waiting lists can be a major benefit.

Availability - Many patients travel abroad simply to avail of healthcare treatment that is not available to them in their own country.

Quality - It is a common misconception that medical treatment in developing countries is not as good as that found in the developed world. In fact, foreign hospitals and clinics that cater to the tourist market are often some of the best in the world. Many foreign hospitals have state-of-the-art facilities, highly skilled doctors and nurses, and high quality care. Some of these countries have also invested heavily in developing research infrastructures that lead to important new developments in healthcare. Countries such as India and South Korea are two of the world’s leaders in biotechnology and stem cell research.

That is not to say that the quality of treatment is the same everywhere. It is important for patients intending to travel abroad for a procedure to ensure that the foreign medical institution is internationally accredited. The Joint Commission International is the accreditation body in the US, whereas the Trent International Accreditation Scheme plays the same role in Britain and Hong Kong. Many hospitals around the world seek to obtain these accreditations in order to attract patients. The International Standards Organisation also accredits hospitals that meet internationally agreed standards. Some countries have adopted their own accreditation standards. For example, the Indian
Healthcare Federation has developed its own standards to attract international patients and to inform them of the country’s healthcare services.

HOW DO PATIENTS OBTAIN TREATMENT ABROAD?

Patients seeking medical treatment abroad who are unfamiliar with foreign services can opt to organise their treatment through a medical travel intermediary or approach a service provider directly. The Intermediary investigates appropriate health care providers and ensures that the patient travelling is well enough to do so. The patient is usually required to provide a medical report, including the nature of the illness, a doctor's opinion, a medical history and diagnosis. The patient then signs an agreement and consent form. Thereafter he procures a medical visa from the appropriate embassy. The Intermediary assigns a case manager from the destination country to make arrangements for the procedure. The case manager will usually tend to all of the patient’s needs for the period of time he is undergoing treatment.

WHERE ARE THE MAIN MEDICAL TOURISM DESTINATIONS?

India - Primarily known for areas of advanced medicine, India has facilities for hip and knee replacement, heart surgery, bone marrow transplants and cancer therapy. India’s medical education system generates an estimated 20,000-30,000 doctors and nurses yearly, and the Indian government estimates that medical tourism is growing by 30 per cent a year.

Thailand - Treatments in Thailand include cardiac and dental surgeries, organ transplants, cosmetic and orthopaedic treatments. The country attracts predominantly US and other Asian patients. The city of Bangkok has become a hub for medical tourism and the International Medical Centre situated there offers services in 26 languages. The Intermediaries that promote Thailand as a treatment destination for medical tourists place a lot of emphasis on the holiday aspects of the country and offer a variety of post-treatment packages.

South Africa - Due to the relative weakness of the South African rand on the foreign exchange market, medical tourism in this country is relatively cheap. South Africa’s main focus is cosmetic surgery, with most patients travelling from Europe. As with Thailand, Intermediaries seek to attract customers by promoting the country’s safaris.

Malaysia - Services provided in Malaysia include procedures in the areas of cardiology, dentistry, ophthalmology, orthopaedics and cosmetics. English is widely spoken. The Malaysian government has developed the medical tourism industry within the country along with the Association for Private Hospitals of Malaysia. The Malaysian Tourism department forecasts that revenue from Medical Tourism will reach €440 million in 2010.

Other Specialty Care Destinations - Despite ongoing turbulent relations with the US, Cuba has been a popular medical tourism destination for many years, offering procedures such as cancer treatment and joint replacement at low cost. Costa Rica is an inexpensive destination for medical care and mainly attracts US patients who do not wish to make the journey across the Pacific. Brazil and Argentina are popular destinations for cosmetic surgery, while Hungary’s expertise in the field of dentistry has attracted many medical tourists, who pay a fraction of what it would cost in the US or other mainland European countries.

WHAT ARE THE RISKS INVOLVED?

One of the main concerns for patients travelling overseas for treatment is the follow-up care they need once they return home. The patient may suffer post procedure complications or side effects. The post treatment care will then become the responsibility of the medical care system in the patient’s home country. The patient may have to travel back overseas if the physician at home is unwilling to provide the care necessary.

A solution to this problem is currently being developed in the US for American patients being treated abroad. It involves the creation of an affiliation between foreign and US healthcare providers with similar credentials. In this way patients returning home can receive the follow up care they require.
Another risk involved in Medical Tourism emanates from the fact that many foreign laws governing medical liability are not as strict as those in developed countries such as the US and Ireland. Compensation for medical malpractice can also differ and compensation for injury can be quite low in relative terms in other jurisdictions. Moreover, many foreign doctors may not have the same level of malpractice insurance. Patients may find themselves with very limited recourse, if any at all, for malpractice when it comes to the judicial systems in some countries.

However, new insurance products are being introduced and now patients can purchase a medical malpractice policy, that will pay out in the event of a negligent medical procedure abroad. It is important to note that the insurance company will usually only cover procedures performed in accredited hospitals by credentialed doctors.

Something also to bear in mind is that regulatory bodies will only have control over practitioners who are on their particular register. This may mean that if something goes wrong, and a patient wants to complain to the regulatory body in the country where the patient is domiciled, the regulatory body may have no power to deal with the complaint if the doctor is resident and practises overseas.

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