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An Interdisciplinary Analysis of Medical Tourism

TANNER L. HUDSON

ENG 2100: Research Writing and Argumentation, Spring 2017

Nominated by: Mary Coyle

Tanner is an Honor student in the College of Science and Mathematics majoring in Biological Sciences: Applied Physiology Concentration, with a pre-medicine focus. After completing his undergraduate degree, he plans to attend medical school. His current medical interests include Orthopaedics and Sports Medicine.

Tanner Notes:

This project afforded me the opportunity to delve into an interesting topic related to my field of study. The research process helped me to continue to develop my own opinions regarding the topic. I hope my work can inform all readers, regardless of STEM or health care knowledge.

Ms. Coyle Notes:

Tanner's argumentative research paper detangles the complexity of this emerging trend in medical treatment. He examines the strengths and weaknesses of medical tourism--taking into account the personal, logistical, ethical, and economic consequences for patients who elect these procedures. He presents his findings in a clear, authoritative voice that makes this complicated topic accessible for all audiences.

Abstract

This article examines the medical tourism market in order to provide potential patients with the evidence needed to make informed decisions regarding health care. This analysis explores multiple studies by authorities in law, business, marketing, communications, and management. Data regarding risks, benefits, contributing factors, marketing materials, and cost-comparisons are employed in order to provide a broad examination of medical tourism. After thoughtful analysis, it is advised that patients pursue medical tourism with extreme prejudice. Further analysis should be employed to examine market projections and evolving governmental policy.

Medical tourism is defined as “international travel for the purpose of receiving medical care” (Rogers, 2016, para. 1). Medical tourism interconnects healthcare and globalism. The medical tourism market continues to grow and expand due to globalism. Medical tourism facilities dot the globe, offering patients alternatives to domestic health care. According to Dr. Makary, M.D. of Johns Hopkins University School of Medicine, "The international medical marketplace is about to take off. We're living in the era of the high deductible — \$10,000 in the bronze family plan under the new health law. People are paying more and looking to cut costs" (as cited in Howard, 2014). The mounting health care costs in the United States and the expanding medical tourism market offer American patients an additional avenue by which to receive the medical care that they need. Therefore, it is necessary for patients to learn of all medical care options, including those in foreign nations. In order to provide an in-depth analysis of medical tourism, publications of experts in the fields of law, business, marketing, communications, and management will be examined. This analysis of medical tourism examines the risks and benefits of medical tourism, the factors that influence people to travel abroad for medical care, the presentation of information on medical tourism websites, and compares the costs of the most popular medical procedures. The purpose of such an analysis is to provide patients with a comprehensive exploration of the medical tourism market and advise patients to use extreme prejudice when participating in medical tourism.

Comprehensive Analysis

In an article analyzing the medical tourism market, Bennie (2014) examines the market from a legal perspective. The medical tourism market

has exploded, and continues to grow. The global medical tourism market is believed to be a 100 billion dollar market (Bennie, 2014, p. 584). This market will continue to grow and develop as insurance providers and governmental institutions create an avenue for patients to seek medical care abroad (Bennie, 2014, p. 586). For example, the company Blue Ridge Paper Products Inc. presented employees the opportunity to pursue medical care abroad, with complete reimbursement (Bennie, 2014, p. 586). This and similar private sector and government advancements will encourage American citizens to consider the medical tourism market. In addition to the reduced cost of care, many medical tourist facilities are designed as five star resorts and staffed with western educated physicians (Bennie, 2014, p. 587). As a result, patients have the opportunity to receive exceptional care in a resort environment for less money than in the United States (Bennie, 2014, p. 587). This combination of benefits continues to impact the global health care market. While these benefits are enticing, it is likely that many would have great reservations about safety and quality. In order to protect oneself from a fraudulent, or dangerous, health care experience, one should consider accreditation by the Joint Commission International (Bennie, 2014, p. 589). The Joint Commission on the Accreditation of Healthcare Organizations certifies American health care facilities; the Joint Commission International is a foreign division of this organization (Bennie, 2014, p. 589). Therefore, such accreditation is a testament to the level of care and the safety of the facility. Highly experienced physicians and accredited facilities calm the nerves of many, yet certain risks remain. The risks include the effect of travel on the patient's current condition and the recovery from an operation, the difficulty associated with acquiring post-operative care from a mainland physician, and the reduced patient malpractice rights associated with foreign care (Bennie, 2014, p. 591-592). After an analysis of the medical tourism market and the associated risks and benefits, Bennie makes several recommendations (Bennie, 2014, p. 597-598). Bennie's recommendations include the need for governmental promotion of legislation that supports the pursuit of foreign care and employer-based protections for employees that seek foreign care (Bennie, 2014, p. 597-598).

While Bennie (2014) examined the expansion of medical tourism through a legal lens, Maniam's (2015) examination is business in nature. Within the analysis, Maniam explores the origin of medical tourism expansion as well as an examination of risks and benefits of traveling abroad for medical care. The major factor that has led to a vast increase in medical tourism is the continually increasing health care expenses (Maniam, 2015, p. 113). Table 1 displayed below represents the expense of medical care in

regard to percent GDP; the table compares the United States to developing economies of several foreign nations. The table displays the fact that in 2006 in the United States, healthcare costs accounted for more than 15% GDP, a figure that has likely increased in the past decade (Maniam, 2015, p. 113).

Table 1
Health Care Expenses Per Respective Nation

	2000	2001	2002	2003	2004	2005	2006
Afghanistan	3.3	3.3	3.6	4.4	4.4	5.2	5.4
Bangladesh	3.1	3.2	3.1	3.1	3.1	2.8	3.1
Egypt	5.6	6	6.3	6.4	6.1	6.1	6.3
India	4.3	4.6	4.8	4.8	4.9	5	4.9
Iran	5.9	6.1	6.1	6.2	6.2	7.8	7.8
Mexico	5.6	6	6.2	6.3	6.5	6.4	6.2
Nigeria	4.3	5.3	5	4.7	4	3.9	4.1
Pakistan	2.5	2.3	2.3	2.2	2.2	2.1	2
Philippines	3.5	3.2	3	3.3	3.3	3.2	3.3
United States	13.2	13.9	14.7	15.1	15.2	15.2	15.3

Note: Retrieved from *Medical Tourism as the Result of Rising American Healthcare Costs in the Context of Healthcare Globalization*, by G. Maniam on March 1, 2017.

In addition to rising costs, a second factor that has led to a vast increase in medical tourism is healthcare globalization (Maniam, 2015, p. 115). Globalization has led to the simplicity of travel to foreign nations and has also led to a drastic decrease in the cost of foreign medical care and the subsidization by destination governments (Maniam, 2015, p. 115). These factors have influenced the expansion of interest in the global healthcare market. The rise of the global healthcare market allows patients to experience the benefits of medical tourism, such as the diminished cost of care, decreased wait periods, and experimental or alternative treatments (Maniam, 2015, p. 117). Nonetheless, just as Bennie, Maniam writes of risks such as the difficulty or inability of receiving post-operative care and the lack of malpractice protection (Maniam, 2015, p. 118-119). Maniam concludes that although risks and benefits exist, medical tourism continues to flourish and, as a result will alter the healthcare market (Maniam, 2015, p. 120).

In the previous two academic publications, Bennie (2014) and Maniam (2015) surveyed the expansion of medical tourism through legal and business lenses respectively. In contrast, Mason and Wright (2011) offered an

analysis of medical tourism through a communication lens. Mason and Wright introduce the factors driving patients to seek foreign medical care and provide data and commentary on the presentation of information on web sites regarding medical tourism. As presented in previous analyses, the cost of domestic health care is a major force that is driving the increase in medical tourism. Table 2 displayed below offers a comparison of the cost of common medical procedures in the United States, India, Thailand, and Singapore (Mason & Wright, 2011, p. 164).

Table 2
Procedure Expenses Per Respective Nation

Procedure	United States	India	Thailand	Singapore
Heart bypass	130,000	10,000	11,000	18,500
Heart valve replacement	160,000	9,000	10,000	12,500
Angioplasty	57,000	11,000	13,000	13,000
Hip replacement	43,000	9,000	12,000	12,000
Hysterectomy	20,000	3,000	4,500	6,000
Knee replacement	40,000	8,500	10,000	13,000
Spinal fusion	62,000	5,500	7,000	9,000

Note: Retrieved from *Framing Medical Tourism: An Examination of Appeal, Risk, Convalescence, Accreditation, and Interactivity in Medical Tourism Web Sites*, by Mason, A. and Wright, K. on March 1, 2017.

The data shows that one of the cheapest alternatives to domestic care is medical care in India. In comparison to India, procedures in the United States are 13 times as expensive for a heart bypass, 17.78 times as expensive for a heart valve replacement, 5.18 times as expensive for angioplasty, 4.78 times as expensive for a hip replacement, 6.67 times as expensive for a hysterectomy, 9.41 times as expensive for a knee replacement, and 11.27 times as expensive for a spinal fusion (Mason & Wright, 2011, p. 164). The cost of care in the United States continues to rise; therefore, the gap between cost of domestic and foreign care will continue to grow. The fractional cost of care in medical tourism hotspots influences patients to seek foreign health care services. After a patient becomes interested in foreign medical care, a large portion will turn to the Internet to research potential destination facilities and physicians. The researchers examined 66 medical tourism websites for benefits, risks, and other factors. Table 3 represents the findings of the analysis and exhibits the percentage of websites that displayed specific

categories of information regarding medical tourism (Mason & Wright, 2011, p. 170-171).

Table 3
Medical Tourism Website Analysis

Appeals	%	% 1 page
Low cost	69.1	—
No wait time	25.0	—
High-quality services	48.5	—
State-of-the-art facilities	31.8	—
Access to latest technology	22.5	—
Physician or surgeon expertise	37.1	—
Personalized services	10.1	—
Longer hospital stays	0	—
Greater convenience	2.7	—
Travel opportunity	48.7	—
Credibility		
Accreditation	29.3	—
Links to accreditation organizations	0	—
American Medical Association recommendations	1.3	—
Physician or staff biography and education	10.0	—
Logo-branding symbol	77.5	—
Use of testimonies	29.8	—
Risk addressed in FAQs		
Postoperative care	—	11.9
Procedural risk	—	7.1
Legal recourse	—	2.6
Complication	—	14.2
General risk		
Postoperative care	4.9	18.2
Procedural risk	1.1	2.6
Legal recourse	2.2	6.1
Complication	2.2	5.4
Payment or monetary information		
Transnational insurance options	4.9	5.7
Upfront cash payments	7.0	8.3
Financing options	9.6	12.6
General information		
Greeting or mission statement	44.8	—
Frequently asked questions	36.1	—
Mapped location to site of services	25.5	—
About us	54.2	21.7

Note: Retrieved from *Framing Medical Tourism: An Examination of Appeal, Risk, Convalescence, Accreditation, and Interactivity in Medical Tourism Web Sites*, by Mason, A. and Wright, K. on March 1, 2017.

The data shows that 69.1% of sites included the reduced cost of care, 25.0% include the lack of wait time, 48.5% included the quality of services performed, 31.8% included references to the medical facilities, and 37.1% included information about the Physicians (Mason & Wright, 2011, p. 171). It is important to note, however, that only 4.9% of sites referenced the risks associated with post-operative care, only 1.1% referenced the risks directly associated with the procedure, only 2.2% referenced the risks associated with malpractice and legal issues, and only 2.2% referenced any forms of complications (Mason & Wright, 2011, p. 171). In the marketing of any product, the advertisements will vastly focus on the benefits and rarely focus on the risks; however, many of these medical procedures are accompanied with the risk of death. Therefore, risks need to be considered equally with benefits, even if they are not presented as such on the websites. The authors conclude that the data represents issues in the presentation of risks and benefits and evaluation of credibility on the websites of medical tourism facilities (Mason & Wright, 2011, p. 175-176).

The final article under consideration does not assess medical tourism through the lens of legality, business, or communication. In contrast, Henson, Guy, and Dotson (2015) evaluate medical tourism through a management lens. Henson, Guy, and Dotson examined the specific factors that influence patients to seek foreign medical care. The researchers examined influencing factors such as confidence in medicine, destination country economic development and safety, destination culture, and travel matters (Henson et al., 2015, p. 11). The data is displayed below in Table 4 (Henson et al., 2015, p. 11).

Table 4
Factors of Influence

Item	Significant international experience		Prior receipt of foreign healthcare		Risk	
	Yes	No	Yes	No	Averse	Tolerant
Medical confidence factors ($\alpha = 0.86$)	4.28	4.44	4.19	4.45	4.50	4.29
Positive patient referrals or testimonials from former patients	4.14	4.26	4.00	4.28	4.26	4.18
Hospital or doctor credentials/accreditation	4.28	4.48	4.22	4.49	4.58	4.28*
Success rates/reputation in treating the condition	4.41	4.57	4.35	4.58	4.65	4.42
Development/safety factors ($\alpha = 0.78$)	3.51	4.00*	3.37	4.00***	4.02	3.73*
Level of economic development/wealth of provider country	3.38	3.70	3.26	3.71*	3.66	3.55
Safety of the provider country	4.14	4.46	4.09	4.45	4.55	4.20*
Perceived attitudes towards Americans held by the country's citizens	3.55	4.22*	3.26	4.25***	4.22	3.91
Political philosophies of the provider country	2.96	3.63**	2.87	3.62*	3.66	3.26*
Cultural factors ($\alpha = 0.85$)	2.55	2.90*	2.45	2.91*	2.90	2.69
Beauty/attractiveness of the physical location	2.48	2.82	2.39	2.82	2.72	2.69
Availability of cultural, entertainment, tourist attractions of the provider country	2.52	2.66	2.48	2.66	2.54	2.65
How similar or different the country's culture is from my own	2.48	2.91*	2.44	2.90*	2.99	2.58*
How similar or different the country's language is to my own	2.79	3.34*	2.70	3.33*	3.42	2.97
How similar or different the country's food is to my own	2.48	2.80	2.26	2.82*	2.85	2.54
Whether the professionals treating me could speak my language or not	3.86	4.13	3.70	4.15*	4.25	3.86
Travel logistics factors ($\alpha = 0.90$)	3.53	4.02*	3.47	4.01**	4.17	3.66***
Availability of quality accommodations for family/friends accompanying me	3.03	3.61*	2.83	3.62	3.77	3.15***
Costs of travel to and from the provider country	3.69	4.21 ⁺	3.61	4.20 ⁺	4.43	3.75***
Length of time I would have to be out of country and away from home	3.21	3.92**	3.22	3.88*	4.03	3.49**
The amount of difference in costs for treatment between provider country and the USA	3.93	4.33*	3.91	4.31	4.48	4.03
If there is professional assistance in making all necessary travel and treatment arrangements	3.24	3.73*	3.35	3.68	3.91	3.35**
Availability of quality aftercare upon returning to the USA	3.76	4.22 ⁺	3.70	4.21 ⁺	4.31	3.95*

Note: Note: Retrieved from *Should I Stay or Should I Go?: Motivators, Decision Factors, and Information Sources Influencing Those Predisposed to Medical Tourism*, by Henson J., et al on March 1, 2017.

The data provides much insight into the factors of influence for potential medical tourism patients. Participants in the study who had little to no international travel experience considered destination country economic development and safety, destination culture, and travel matters of great importance in their consideration of medical tourism (Henson et al., 2015, p. 10). Those who had previously participated in medical tourism did not consider destination culture and destination country economic development and safety as important to their decision as did those who had never

participated in medical tourism (Henson et al., 2015, p. 10). In addition, those who had never participated in medical tourism weighed travel matters with greater importance than those who had previously participated in medical tourism (Henson et al., 2015, p. 10). It is also important to note that there is little difference in confidence in medicine factors within the categories of international travel experience and previous medical tourism experience (Henson et al., 2015, p. 10). The authors conclude that the most significant factors of consideration are in regards to confidence in medicine (Henson et al., 2015, p. 12). The authors believe that this data will be beneficial in establishing advantageous communication through marketing materials (Henson et al., 2015, p. 14). As a potential medical tourist, one must be mindful of these factors of influence, as medical tourists facilities will market to these specific factors of influence. It is imperative to critically examine all resources to separate health care information from targeted marketing.

Effects of Health Care Costs on American Citizens

After analysis of the academic publications above, it is safe to conclude that the rising cost of health care in the United States is a concrete, accepted factor that influences Americans to pursue foreign medical care. The rising health care costs have adverse effects on the everyday lives of American citizens. It is estimated that 10 million Americans between the ages of 19 and 64 cannot afford housing, food, or utilities as a result of mounting health care debt (LaMontagne, 2014). In addition, it is estimated that 1.7 million Americans will be affected by bankruptcy as a result of mounting healthcare debt (LaMontagne, 2014). Lastly, it is estimated that 25 million Americans between the ages of 19 and 64 do not follow prescription intake instructions due to rising health care costs (LaMontagne, 2014). It is clear that the excessive cost of health care in the United States places economic strain on American citizens. Accumulating medical debt can burden patients for decades and lead to further personal and economic turmoil. Continued debate on the health care environment in the United States is essential to protect American citizens from these debilitating experiences.

United States Centers for Disease Control and Prevention

When considering medical tourism, American citizens should turn to a trusted source on current health care issues. The Centers for Disease Control and Prevention provide expert, established opinions on the topic of medical tourism (Medical Tourism, 2016). The CDC cites several risks associated with receiving medical care abroad (Medical Tourism, 2016). The risks include the language barrier between patients and medical staff,

unrestricted medication, resistance to antibiotics, and blood clots caused by air travel (Medical Tourism, 2016). In addition to risks, the CDC provides guidelines to follow in the event that a patient decides to pursue medical treatment abroad (Medical Tourism, 2016). The CDC recommends that patients should confirm the accreditation of the physicians and health care facility, acquire a contract between patient and hospital, inquire about potential language barriers, provide the facility with all personal medical records, and ensure post-operative care upon return to the United States (Medical Tourism, 2016). In order to protect oneself from malpractice, it is important to follow the direction of these healthcare experts.

Conclusion

Health care costs continue to rise in the United States. Neither insurance companies nor the Federal Government have presented a cost saving approach to health care. Employers have implemented high deductible health plans to reduce operational expenses. In addition, the Affordable Care Act, although well intentioned, has further caused a rise in health care costs and an excessive rise in premiums. A compromise is necessary between both major political parties and health insurance companies to reduce health care costs. The compromise, however, must continue to protect Americans from losing health care coverage as a result of pre-existing conditions and continue to allow children to stay on their parents insurance until the age of 26. Until the stagnant, infighting Congress compromises on this issue, health care costs will likely continue to rise--at the expense of everyday Americans. Nonetheless, Americans, due to globalization, have the opportunity to bypass the rising health care costs in the United States and procure medical care in foreign medical tourism hotspots. Medical tourism continues to grow and expand as many choose this alternative to domestic care. This analysis offers potential patients a comprehensive examination of medical tourism in the hope that patients will make informed decisions regarding their health care.

The field of medicine is a profession that requires undergraduate education, medical education, residency experience, fellowship experience, and board certifications. The extensive education is in place to ensure the safe and appropriate care of all medical conditions, including those of life-threatening nature. Nonetheless, health care in general, especially surgical procedures, is coupled with many apparent risks. As a result of the extensive risks associated with health care, it is important for patients to be prudent when examining medical tourism. Medical tourism is often the best option for patients' personal and financial circumstances; therefore, medical tourism

deserves a fair analysis. After much analysis, it is concluded that medical tourism is typically a safe alternative to domestic care. It is also concluded that one should follow specific steps in order to protect oneself from any complications. Therefore, it is advised that patients pursue medical tourism; however, extreme prejudice shall be employed when selecting destinations, facilities, and physicians.

References

- Bennie, R. (2014) Medical Tourism: A Look at How Medical Outsourcing Can Reshape Health Care. *Texas International Law Journal*, vol. 49, pp. 583-600.
- Henson, J., et al. (2015) Should I Stay or Should I Go?: Motivators, Decision Factors, and Information Sources Influencing Those Predisposed to Medical Tourism. *International Journal of Healthcare Management*, vol. 8, no. 1, pp. 4-14.
- Howard, B. (2014) Should You Have Surgery Abroad. *Health Conditions & Treatments. AARP The Magazine*
- LaMontagne, C. (2014) NerdWallet Health Finds Medical Bankruptcy Accounts for Majority of Personal Bankruptcies. *NerdWallet Health. NerdWallet, Inc.*
- Maniam, G. (2015) Medical Tourism as the Result of Rising American Healthcare Costs in the Context of Healthcare Globalization. *Journal of Business & Behavioral Sciences*, vol. 27, no. 2, pp. 112-122.
- Mason, A. and Wright, K. (2011) Framing Medical Tourism: An Examination of Appeal, Risk, Convalescence, Accreditation, and Interactivity in Medical Tourism Web Sites. *Journal of Health Communication*, vol. 16, no. 2, pp. 163-177.
- Medical Tourism. (2016) *Centers for Disease Control and Prevention*.
- Rogers, K. (2016) Medical Tourism. *Encyclopædia Britannica*.