



Medical Tourism

PATIENTS NEED TO CAREFULLY WEIGH RISKS AND BENEFITS

BY GENEVIÈVE M. CLAVREUL, RN, PHD

MEDICAL TOURISM IS A HOT—AND I mean hot—topic these days. Its coverage in newspapers, magazines and on television continues to attract a great deal of attention not only from the medical community, but also corporate America, including insurance companies, and the public at large. In many ways this coverage is beneficial, bringing to light the pros and cons of seek-

ing intricate and often life-saving surgery thousands of miles from home.

The rise in popularity of medical tourism forces nurses to consider what kind of influence it might have on the future of our field. In the long term, the outcomes could prove far-reaching on what hospitals, doctors, nurses and patients expect in the ways of health-care services and outcomes.

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A similar operation in France is \$33,100, and in India, just \$7,000.

Historically, the United States has been a destination for people from foreign countries coming in search of treatment that was unavailable or in limited access in their home countries. This continues to be the case for both medically necessary and elective procedures. For example, with the Euro gaining strength against the U.S. dollar, many Europeans are coming here for cosmetic surgery not covered by their national healthcare plans.

What we're seeing now is that many Americans are traveling outside the U.S. in search of low-cost, quality care. As foreign countries have upgraded, expanded and improved their homegrown and imported talent, they have developed hospitals that appear poised and ready to compete with the American care model. For example, many foreign hospitals have assertively adopted JCI (Joint Commission International) accreditation, which is the nonprofit, international arm of the Joint Commission.

There are many reasons why a person would choose to participate in medical tourism instead of seeking treatment stateside. The most common reasons are cost, convenience (believe it or not), quality of care, and the ability to combine the procedure with a vacation. Some of the more popular destinations for medical tourism are (in no particular order of importance) Mexico, Costa Rica, Brazil, Argentina, South Africa, India, Thailand, Malaysia and Singapore.

The cost difference can be significant. For example, a heart bypass is around \$100,000 in the U.S., \$33,100 in France and \$7,000 in India; a hip replacement is around \$40,000 in the United States, \$15,000 in France, and \$5,800 in India; and a knee replacement costs around \$35,000 in the U.S., \$17,000 in France and \$6,700 in India. Thus one can see why many individuals may find it attractive and sensible to seek treatment outside the United States.

Some countries have gone one step beyond in supporting medical tourism, where a patient might expect to find hospitals that are like luxury hotels, bringing state-of-the-art medical equipment alongside a feeling of being cared for at a spa or resort. In some cases, the patient can schedule a pre- or post-surgery tour of the country, organized by the same concierge team that arranged their medical care. Many of these specialized hospitals have an entire team that is devoted to a specific patient, staffed by a doctor

who is available nearly 24/7, and Registered Nurses (no LVNs, CNAs or techs) dressed in the traditional starched white uniforms of the old days.

Many of us who have been privileged to either serve in the U.S. military or be the spouse of an active-duty service person have required medically necessary care while stationed in a far-off land. In most of these cases, our care was provided on a U.S. military installation and thus it is very much like being cared for on U.S. soil.

Unfortunately, there are times when even our U.S.-based military hospitals are not able to provide treatment, as was the case when my husband and our family were stationed in Bangkok, Thailand in the late '60s. At that time the doctors at the 4th Army Field Hospital were not equipped to provide the corrective surgery that two of my children needed. Both were born with the congenital eye defect strabismus. My daughter's case was less severe than my son's, who was so crossed-eyed that it impaired his ability to do many age-appropriate behaviors.

It was at the base doctor's suggestion that we consult with a local Thai eye specialist who had succeeded at surgically correcting this eye defect and who trained at Tulane Medical School in Louisiana. The Thai doctor assured us that he could easily correct my daughter's eye defect, but expressed some trepidation at performing surgery on my son since he was under a year in age. After taking into consideration the educational delays that might stem from waiting, and assessing my skills as a nurse, he agreed to perform the surgery on my baby. Both children came through with flying colors. To this day many ophthalmologists marvel that the surgeon in Thailand was able to perform each correction with just one surgery.

As healthcare professionals, we are no strangers to having friends, family and business associates ask our opinion on issues concerning health and medicine. They may seek our advice on whether or not to have knee-replacement surgery at a hospital in Singapore or India.

If you find yourself being asked to provide an opinion on medical tourism, consider and possibly share the following: Though seeking medically necessary treatment in a foreign country appears to have many benefits, there are



also risks. As potential patients, they need to do their own research and weigh the risk/benefit ratio instead of basing their decision solely on the information from a medical tourism brochure. Some important questions to ask are:

- Does that hospital participate in the JCI?
- Are its physicians board-certified (or that nation's equivalent) in the procedure?
- Do they have staff members who are competent in your native language?
- How many procedures of this type do they perform each month/year? (Remember that with surgery, practice, practice, practice greatly increases the proficiency of the surgeons and generally improves the outcome for the patient.)
- What type of follow-up can you expect once you return to your home country? (Some American physicians are uncomfortable following up on a medical tourism patient.)
- What is the stability of the government where you will be receiving your medical treatment? And so forth.

Remember that traveling to a foreign land means there will be differences to being treated in the States. Make sure that you are up to date on all necessary immunizations, that all your travel papers and documents are in order, that you sign in with the local U.S. embassy, and that you have all your ducks in a row prior to leaving. **WN**



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