

THE CURRENT TRENDS AND OPPORTUNITIES IN THE INDUSTRY OF MEDICAL TOURISM

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Abstract

The industry of medical tourism is a non-regulated domain and due to this, it has certain risks. The existing information is variable and fluctuating because there is no unique trustworthy authority that could provide information. The travels performed with the aim to benefit from medical services are not something new but they manifest within a new, growing and globalized context. The aim of this study is to identify the current status of Romanian Health Tourism in the light of the data collected from the specialised bodies, to evaluate the developments and to make recommendations on what should be done in the future. The study is supported by a general analysis of the literature in the field of medical tourism. The study integrated policy analysis, desk-based work, and economic analysis to estimate preliminary costs. The results obtained highlight Romania's advantages on this special market – of the medical tourism, the activities that need to be performed for a better visibility and get a competitive advantage as well as the risks that our country faces when it encourages and develops this type of tourism.

Key words: *Patient-tourist, medical services, special market, advantages/disadvantages, risks.*

JEL Classification: *Z32, Z39.*

I. INTRODUCTION

Being known as a distinct market since the 1980s, medical tourism has registered an evolution with impressive dynamics. Regardless of the reasons that influenced the patients towards the medical services from other countries, among which (Ehrbeck *et al.*, 2008) the access to high-quality services, low costs, technology, doctors' reputation, medical tourism represents a challenge both for the providers of medical services and for public administration. Certain factors contributed to the dynamics of this type of tourism: income growth, the persons' wish to travel abroad for health services, the development of the low-cost airline transport and the expansion of the internet marketing. According to the report Medical tourism market, the market of global medical tourism has been evaluated at 10.5 billion dollars in 2012 and it is estimated that it will reach the value of 32.5 billion dollars in 2019 at the CAGR (compound annual growth rate) of 17.9% 2013-2019 (Albany,

2014).

Medical tourism is defined as a travel performed by the patients from their country of origin to other destinations where they benefit from medical services. Medical tourism includes a "tourism" aspect which is the "consumption of services associated with tourists such as transport, accommodation, hospitality" (Stackpole, 2010).

Medical tourism should not be mistaken for wellness tourism. The last one is oriented towards prevention or maintenance of the health state while medical tourism means to travel in order to improve one's state of health (Stephano, 2010). Medical tourists are generally the inhabitants of the industrialised countries of the world and they come mainly from the United States of America, Canada, Great Britain, Western Europe, Australia and the Middle East. More than that, people from other countries seek places where they can enjoy their holidays and get medical treatment at the same time, all of that at a reasonable price. The medical tourism is

an opportunity for the patients to travel while benefiting at the same time from medical care at low costs without waiting time.

Health Tourism is one of the typical sectors of knowledge economy because health care has a knowledge-intensive feature. New approaches and service diversification observed every day in the field of health on one hand, the high-technology industry it has developed and utilized on the other, make the health sector become more knowledge-intensive. Because of this feature as in the other information-intensive sectors, the added value of this sector is quite high.

The patient is in fact a consumer who makes decisions related to his need of medical assistance in terms of costs, quality and access (Burciu *et al.*, 2010; Bostan *et al.*, 2010; Bostan, 2005, 2010a). He searches for the place where he could be treated best and then for the right provider. At the same time, other reasons that may represent the drive for medical tourism beyond prices are: the high cost of medical insurances in the USA and Canada as well as the long waiting lists for certain interventions. It is estimated that approximately between seven and nine million persons travel for medical purposes at global level (1.6 million inhabitants in the USA travelled abroad in 2012 for medical care) (Deloitte Medical Tourism, 2009). According to a research report (Grail Research LLC, 2014), the Americans spent around 35 billion dollars for procedures in the health field in foreign countries, most of them in Asia and Latin America (Table 1).

Table 1. Top countries in medical tourism

Country	Number of medical travellers	Medical tourism procedures	Savings comparison of the US cost %
Thailand	2.5 million	Dental services Cosmetic surgeries	30
Singapore	850 000		35
Malaysia	770 134		30
India	166 000		20
Mexico	80 000	Orthopaedic and cardiovascular cases	25-35
Latin America (Costa Rica and Panama)	40 000		30-40

Source: Processing based on the information available on the website: <http://www.health-tourism.com/medical-tourism/statistics>

Asia has been and still is a popular destination for the dental and cosmetic services but in the last years, more complex procedures have been introduced. A higher number of patients go for cardio-vascular services or orthopaedic procedures in countries such as Singapore and India (NaRanong and NaRanong, 2011). There is a growing interest in other types of health services abroad such as alternative, holistic

medicine and wellness programmes, different from the existing ones. Alternative medicine such as Ayurveda, acupuncture and homeopathy gain popularity within medical tourists. New touristic destinations have recently started to appear such as South Korea, Taiwan and Philippines. They represent players with high potential on the medical services market and are a real threat to the traditional players from South-East Asia. Malaysia has been a rising star until last year. The medical services providers are equally performing but the lack of trust in the transport system and the security devices in airports have deteriorated the country brand as regards its medical tourism (Ilan, 2014).

The providers in the USA try to influence at global level through partnerships or associations or even new investments in order to attract a part of the medical tourism market. The regulatory organizations such as Federal Drug Administration (FDA) from the USA, CE Marking or China Food and Drug Administration (CFDA), which approve the sale of new technologies, continue to become stricter and postpone the access to new treatments. It is possible that other countries and regions could become the go-to hub for cutting edge care. India and Singapore have already become the standard model for cardiac care at global level. Nowadays, medical tourism does not stand for cheap procedures and holidays any more. It also includes the quality of medical staff and technology, costs and the time involved for recovery. Lately, the "newly entered" countries in EU from Central Europe, Hungary, Poland, Czech Republic, Romania and Latvia have become popular destinations for the American and Canadian citizens. Attracting patients, most of them coming from other European countries than Central Europe, enjoys a substantial financial support from the EU. The Central and East European countries are renowned for natural spas and wellness centres which have a local tradition dating back to centuries ago. In Hungary there are approximately 1,500 thermal springs. This region is more and more a chosen destination for more serious procedures such as cardiac and orthopaedic surgical interventions, including heart transplants and the treatment of prostate cancer (Medical Tourism, 2014).

According to a relatively recent survey (Medical tourism research, 2012), conducted by the portal Treatment Abroad in 2012 on 1,045 Europeans shopping for procedures abroad (half of them British), the top three most popular locations were Hungary, Belgium and Poland, followed by Spain and Czech Republic. The size of the medical tourism market in Europe or in Central Europe is difficult to measure since there are not official data on these indicators, but only scraps of official data. Poland is the biggest country in the region that attracted the most of the European funds. According to an estimation, in 2011,

the foreigners spent in the Polish medical units 800 million zloty (28.6 million dollars). A research report, "Poland Medical Market Tourism" (2013), shows that during 2010 - 2013 around 600,000 medical travellers visited Poland.

The prices in Central Europe are hard to beat. The dental implants for instance, cost on average 4,000 dollars in the USA and an equivalent of 4,200 dollars in Great Britain. The same procedure would cost around 780 dollars in Hungary or Poland and even less in Czech Republic. A hip replacement in the USA costs 50,000 dollars while in Poland it is 11,500 dollars (Skowron and Sak-Skowron, 2014). In Hungary, the Government allowed grants-in-aid worth 76 million dollars for this field, starting with 2012, including for spa facilities, dental care and ophthalmology. The results are visible since in 2013, 2 million foreigners arrived in Hungary to use the medical services, including the therapy of thermal baths. Most of the tourists come from Austria and Germany as well as from the Netherlands, Slovakia, Poland and Czech Republic (Hungarian Central Statistical Office, 2014).

II. MATERIALS AND METHOD

The aim of this paper is to analyze the current trends and opportunities in the field of medical tourism and to identify the success factors of the destinations for this type of tourism and of the medical services providers. Based on relatively recent data and information, the current global trends that affect the medical services market will be analyzed and the risks and opportunities that the medical touristic destinations and the medical services providers are faced with will also be identified. The study is also supported by a general analysis of the literature in the field of medical tourism. The study integrated policy analysis, desk-based work, and economic analysis to estimate preliminary costs.

By determining the factors that affect the medical tourism industry, the providers can get an accurate outlook on the segments that can be served, which is the profile of consumers that make up this segment and which structural changes they need to make in order to better attract and serve these consumers. The information obtained by means of this study should help the development of the medical tourism through the focus of efforts on the most profitable segments of the market.

III. RESULTS

Romania, Bulgaria, Hungary, Croatia and Serbia count among the European countries as the most battered by the economic crisis that started in 2008, but they also invest in healthy and efficient clinics in order to attract the Western Europeans and the Americans for interventions that are not covered by social security. The rapidly expanding industry of medical tourism produces annual incomes of 250 million dollars for Romania (Daily Income, 2014), and in this way the doctors and nurses who practice abroad can come back in the country.

Romania is among the countries that also developed this segment. And even if the incomes generated here are at a much lower level, the potential is huge: having the lowest costs in the European Union at medical services, the local market of medical tourism could exceed 400 million Euros in 2015 (Pop, 2014), which is double in comparison with the current level. This could be possible especially after the implementation of the Directive no. 24 (EU, 2011; Bostan, 2010b), which stipulates the free access to treatment in the community space for all EU citizens. The only problem that could impede this development is related to the sanitary infrastructure and transport which are insufficiently modernized.

Despite this, over 70,000 foreign patients have been treated in Romania in 2013 and their treatments were by 50% cheaper than the corresponding ones in their origin countries (Pop, 2014). This is the reason why the medical tourism market in Romania is so dynamic and increases by more than 30% every year. Practically, of the 2 million tourists who visit Romania, around 2-3% comes to benefit from medical services. The table below (Table 2) expresses in figures the price differences between Romania and other EU countries.

Table 2. Prices for medical services – comparison between EU and Romania

No. crt.	Type of intervention	Average price EU hospitals (euro)	Price in Romania (how much CNAS subsidies) (euro)
1	Cranian CT	116	20
2	Knee Athroscopy	450-750	30
3	Appendicitis surgery	900-1800	310 for each successful case
4	Glaucoma surgery	1 650	750
5	Dental Implant	1 000	500

Source: Tratamete în străinătate (22); Pachet de servicii medicale în asistența medicală spitalicească (23)

The foreigners that come to Romania (the range of reasons is presented in Table 3) to benefit from medical services want predominantly interventions in the field of esthetical surgery (42%) and in the field of dental medicine (32%).

Table 3. Why choose Romania for medical services?

Reasons to choose Romania	Explanations
Romania is a safe country	The country is politically stable and the criminality rates are relatively low in comparison with the international statistics.
Care and recovery	The Romanian hospitals do not discharge the patients the following day after surgery, excepting the case when this is expressly requested. The care plays an important role in the recovery process.
Special vaccinations	There is no need for special vaccinations when they travel to Romania.
High quality level of medical services at competitive prices	Romania lowers very much the international average when it comes to the treatment costs. The ratio quality/cost is very favourable and significant savings are possible.
There are no waiting lists	With well-endowed clinics and specialised personnel, Romania is very attractive for the persons who cannot receive treatment quickly or they do not want to wait for their treatment.
Foreign languages	The highly qualified personnel speak at least English.
Lack of prejudices	Romania is a tolerant country which lacks prejudices and does not make discriminations.
Transport	There are international airports in most of the big cities with direct flights inside and outside Romania.
Moderate climate	Romania has four seasons. With snow in winter and hot weather during summer, the climate is full of contrasts but without extreme meteorological phenomena. The patients which are particularly intolerant to heat and humidity will enjoy dry and warm summers in Romania.
Geriatric treatments	Geriatric Tourism (Aslan method) can be performed in Bucharest, Constanta and Eforie Nord. The diagnoses are set by specialist doctors and treatments are customised. What is specific for this last location is a combination of natural factors specific to the Romanian seaside, the salty water and the mud from the Techirghiol Lake. Other treatments such as the beauty, the relaxation and health ones are also available.
Thalassotherapy	It is practiced in a seaside climate using the therapeutic properties of the marine water (chemical and mechanical effects). This is also doubled by hydrotherapy (using tapping water or spring water) and it is largely practiced but with limited properties.

The most requested interventions in the field of oral medicine are the dental implant, the zirconium ceramic crowns, the teeth whitening and canal obturations. Still, due to the precarious endowments and lack of doctors, the sanitary system is not fully prepared for the maximum potential of this market, which some estimate as being at around half a million euro. When looking at the opposite pole the situation is not different: only 10,000 Romanians go annually for treatments abroad.

Unfortunately, a great part of the medical tourism performed by Romanians in the EU is based on cases relying on the Form 112, for which the patients always gather money from phone donations. Normally, the European Directive of the free access to treatment in the EU should allow more Romanians the chance to treat themselves abroad since the services will be subsidised in the country of origin. The Romanians are disadvantaged precisely due to the low prices of medical services which makes that the amounts needed to be paid as a difference be extremely high. There is thus a paradoxical situation: our advantage to develop a half a million euro market prevents the Romanians to benefit from a European directive that could facilitate the treatment in any great EU hospital. Since the global demand for health is increasing, triggering the growth of incomes, medical tourism has drawn the attention both of public and private institutions.

There is a series of success factors which support the development of the medical services industry:

1. The high qualification of the workforce. A destination for medical tourism implies the existence of a very highly skilled workforce. At global level, it was discovered that all the locations that are

destinations for the medical tourism are also university centres (Abratt and Firat, 2011).

2. The improvement of the health services quality. In the future the focus will also be on the quality of services and the reduction of risk for the patients of the medical tourism. The quality can be improved through education, accreditations and consultancy services. In this regard, at global level, two types of accreditations are useful: Joint Commission International and TEMOS. The last one was introduced in 2010 and it “certifies the quality of the services and facilities at hospitals, clinics, and dental clinics worldwide” (Ratner, 2012).

3. The improvement of consumers’ experience. Having high quality medical services is not enough. This should be transmitted to the potential buyers in order to influence the decisional process. The patients’ perception regarding the medical services must meet the expectations shaped by marketing efforts (Cook, 2012). The consumers’ fears, especially during the planning process and before the arrival represent a major obstacle that needs to be overcome.

4. Awareness of Legal and Regulatory Environment. The reforms applied in different countries as well as the legal differences (the regulations in other sectors, including labour law, visa and immigration right, fiscal law) may represent a hindrance in the development of medical tourism, etc. At the same time the patient’s fears related to malpraxis must also be considered (Lunt *et al.*, 2011; Stephano *et al.*, 2012).

5. Collaboration and cooperation between industries through strategic alliances and other players in the industry or alliances between employers and providers of medical services.

6. The segmentation of the market and an efficient marketing. The accent should not be placed only on the quality of medical services but also on the patients' experience and satisfaction in relation to the interaction with the personnel, the doctors and facilitators. These experiences will be transmitted by word of mouth towards potential beneficiaries of medical services. Since the market of medical touristic products and services has not developed based on market research, these are incorrectly designed, they have sometimes an unrealistic price and are traded in an unfair manner. Instead of focusing on what consumers want, the industry tends to concentrate on the conception of a product that will subsequently attempt to sell (Youngman, 2012).

7. Building a positive relationship with the community because there is the inhabitants' fear that the arrival of wealthier patients from richer countries will increase the price of medical services and will restrict the access to medical assistance of the locals and will also put pressure on the available resources.

On another hand, the development of the medical tourism may turn upside down the "brain drain" of professionals in the medical field abroad and thus it will increase the quality of medical services in the country. The development of medical tourism offers jobs and increases the wages for the locals (Gan and Frederick, 2012), while a part of the incomes obtained can be invested in the development of the local economic growth.

IV. DISCUSSION

Medical tourism, in its meaning of habit to travel in another country for health reasons is in fact a compromise. Even if there are advantages such as accessible costs, high quality medical assistance, recovery and holidays all at the same time, medical tourism also has its risks. Among these risks one can count legal and ethical issues. If there are problems, the patients or the medical tourists are not covered by personal insurances or by insurances which could help them claim compensations through malpraxis processes. Even if lots of hospitals and clinics abroad have medical malpraxis insurance, the request for compensations can be difficult, because the insurance legislation is different from one country to another. When focusing the national resources on treating foreigners, the host country risks to deny its own citizens the equal access to medical care, and it promotes a health system with two levels defined by patients' incomes (Ramirez de Arellano, 2007). The market of medical tourism is difficult to study since there is the need for information that should be communicated at trans-border level from several industries and most of the time the information about consumers is confidential and protected by law. Due to the dispersed nature of the academic research in the field of medical tourism, the study has used statistics and reports of professional organisations.

As medical tourism is a global phenomenon and is attractive for a wide variety of consumers, it represents an opportunity to extend the business by means of existing locations and clients, without major investments of capital. When combining the two, tourism and medical care, Romania creates the opportunity to sell medical tourism options for the consumers who already are buyers of the two services but in a separate way. Moreover, the fact that patients are not interested either on quality or cost since they are interested in the total value means that the tourists-patients may be accommodated depending on the budget either in luxury spaces or in recreational facilities. The possibility to blend the holiday with non-invasive surgical interventions also means that there is no need to redesign the spaces. It depends on Romania how much it will gain from medical tourism: there is high potential spread on two tiers: resorts and high quality health services. The resorts that were once considered the pearls of the Romanian tourism are now in decay, a paradoxical aspect if we think that Romania covers a third of the thermal bath potential of Europe. As for the top quality health services, these are for foreigners synonymous with comfort and luxury. It is easy to understand that they will not find them in the state hospitals but in the private ones which in exchange, have prices by 20% higher than the private hospitals in EU. A solution for Romania to obtain higher incomes from medical tourism is to modernize the state medical facilities.

The trends that are shaping offer the guarantee that the medical tourism market will continue to extend in the following years. Until 2015, the health state of the Baby Boom generation will decline and with more than 220 million boomers in the United States, Canada, Europe, Australia and New Zealand, it represents an important market for cheap and high quality medical tourism (Menvielle *et al.*, 2011).

Medical tourism will be particularly attractive for the United States where approximately 43 million people do not have insurance and 120 million are without dental coverage, values which are still increasing. The patients from Great Britain, Canada and other countries with long waiting lists for major surgical interventions will be as eager to profit from the health care offers from other countries. When people choose to travel abroad in order to benefit from medical treatment and services and this is a success, they return to their work place and the economies obtained may be substantial for domestic health and social services. In the case of medical travel increase, these costs become savings for the country providing patients.

Medical tourism is profitable for both countries, on one hand those which offer patients and on the other hand those welcoming patients and the marketing efforts will be shared. The countries where the costs for health insurance are high will be interested to promote medical services from other countries where

these services are cheaper. For some there are savings, for others it is a solution to get income.

V. CONCLUSION

Romania is a country which counts on the world's map of medical tourism. Its potential has particular significance from two points of view: resorts and top quality health services. The cost is never the only motivation or the main one for those seeking treatment abroad. If we make appreciations in the light of the incomes obtained from this field of activity, we discover that these are rather modest.

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