

Healthcare beyond borders

By **LIM WEY WEN**

starhealth@thestar.com.my

Why more and more people are travelling thousands of miles for care, and how it can be a viable option.

JUST about six months ago, after a few bouts of gall bladder pain, self-employed IT consultant David Cook received a piece of bad news from his doctors: his gall bladder had to be removed.

But what dismayed him more was what it would cost him to undergo the procedure.

“After the surgeon gave me his best guess on the cost of the procedure, a whopping US\$7,000 (RM 22,680) for the whole deal, my heart sank. Did he say US\$7,000? He must be joking,” read his first blog post in his blog “My Medical Tourism Journey”.



Josef Woodman...A smart health traveller is an informed health traveller.

It's not that Cook wasn't insured. He is. The problem is if he spends more than half of his US\$10,000 (RM 32,400) deductible health insurance plan this time, he will exhaust most of his accumulated medical savings. He is just 47 years old.

“Looking back on that day, I now wish that my surgeon was right because the cost was more like US\$11,000 (RM 35,640) on the low end and about US\$15,000 (RM 48,600) on the upper end,” he writes.

He decided to wait another few months before calling his surgeon's office in February to check whether he still needed the surgery. But no, even when he was pain-free for the last two months, he was told there was little chance his gall bladder would recover. It would have to go.

Unwilling to pay the amount for his surgery, he considered going out of the country (US) for his procedure. “I had heard of the concept of medical tourism, but never seriously considered it. However, never before had I been faced with such steep medical costs,” he explains.

Later, he got on the Internet, did extensive research on the choices he had, decided that he wanted to experience arranging his own medical trip, contacted the hospitals and doctors himself, made his decision, and boarded a plane to New Delhi on April 11 to have his gall bladder removed. And since he was travelling all the way there, he also arranged to have his dental bridge replaced, his colonoscopy done, and his heart checked in three different centres.

Altogether, he saved a little more than US\$14,000 (RM 45,360).

“Some might call it stupidity,” says Cook, when contacted through an online chat programme last Thursday – the day he returned to Atlanta after his trip. “I like to call it being adventurous.”

Having options

While Cook has just joined the millions of his fellow Americans who have travelled abroad for medical care due to financial considerations, he was one of the few who dared to go ahead with the trip without a medical travel facilitator.

“A facilitator offers a number of advantages. They arrange the medical tourism visa, book accommodations, schedule the procedure, find an appropriate doctor and hospital, assist with touring packages either before or after surgery, and much more.

“Without a facilitator, I lacked a patient advocate who could intercede with hospitals and others so that I would have been shielded from language barriers, and compete with the local population for simple tasks such as paying bills,” he said.

Looking on the bright side, Cook said he observed little details and oddities about the Indian healthcare system he wouldn’t have learned if he was assisted by a facilitator. “The only way for me to know that was to go through the process all by myself,” he says.

But facilitated or not, going by the 10-fold growth in the number of healthcare travellers to Malaysia for the past 10 years (reported in the 2009/2010 *Malaysian Economic Report* as 39,114 to 374,063), more people are travelling abroad to destinations such as Malaysia for affordable and quality care.

While medical travel is no stranger to the rich and famous, it is new enough for the middle wage earner and cash-strapped.

“We are talking about patients who are in the middle, not the luxury travel kind,” says Josef Woodman, author of the medical travel guidebook *Patients Beyond Borders*.

Woodman was in Kuala Lumpur recently as a guest speaker at a Healthcare Tourism Congress organised locally.

These are the patients who are either highly motivated by cost, or just plain desperate, because they could not afford healthcare in their home country, are underinsured, or not insured, he explained.

That said, not all healthcare travellers travel to save cost.

Some travel because the waiting lists in their countries for some procedures are too long. Others look for options elsewhere because a certain test or treatment is not available, or is yet to be approved in the country where they live.

In some emerging economies, it is also a matter of having a little extra to spend on better care. “When the healthcare in a country lags behind the progress of the middle class, they have more resources to get more care,” Woodman explains.

So, even if the motivation differs, a healthcare traveller can come from anywhere around the globe – not just the developed world, where mounting healthcare costs sometimes outstrip its average citizen’s ability to pay.



Medical checkups, wellness therapies, elective surgeries (planned, non-emergency surgeries) like hip replacement and cosmetic surgery can be arranged to be done in other countries, just as long as you can pay for them.

Procedures galore

The next question would be: what kind of procedures could you do abroad? The answer is: almost everything, really.

From medical checkups to wellness therapies, to elective surgeries (planned, non-emergency surgeries) like hip replacements and cosmetic surgery that medical tourism is

traditionally known for – as long as it is available in another country, you can make arrangements to do it there.

Even so, the very nature of medical travel makes it work for certain procedures more than others.

First, you've got to be able to get on the plane and arrive there safely without complications. So, it is always wise to check with your local doctor whether medical travel is for you.

Second, you've got a limited amount of time to get assessed by your doctor, complete your tests or treatments, and recover from them at your destination to be fit enough to hop on the plane back.

So, the more straightforward the procedure is (which means it is fairly simple and quick to figure out or confirm what's wrong and the appropriate way to treat it) – the easier you can travel to do it elsewhere. Also, it would help if you can recover quickly from the procedure.

“For instance, you wouldn't think that a bypass would be okay, but it is fairly mechanical, and the recovery period is fairly short,” says Woodman. “Usually, a working patient can't stay more than two weeks in a foreign country,” he explains.

In this regard, Woodman suggests that medical travel is generally good for most cardiac, orthopaedic, cosmetic, and dental procedures.

“When you wander into grey areas (like oncology), where the diagnosis and/or the recovery take longer, some people just couldn't stay for the length of time required,” he explained.

Weighing benefits

While travelling abroad for care has a lot going for it, it is not without accompanying risks.

In keeping his readers grounded, Woodman gives this sobering advice in his introduction of the Malaysian edition of *Patients without Borders*.

“While one newspaper or blog giddily touts the fun 'n sun side of treatment abroad, another issues dire warnings about filthy hospitals, shady treatment practices, and procedures gone bad.

“As with most things in life, the truth lies somewhere in between,” he adds.

In another country, you might be exposed to infections you haven't been exposed to in the past and your immune system might not be equipped to fight it. You might also face

difficulties communicating with the local community there if you do not understand their language or accent.

If a procedure had gone bad, you might not be able to seek legal recourse due to the difference in legal systems. Travelling shortly after a surgery might also increase your risk of developing deep vein thrombosis (a blood clot in your deep veins, usually the large veins in your leg).

All of that has to be taken into consideration when you are contemplating medical travel.

Woodman reminds his readers in the same guidebook that despite the name “medical tourism”, medical travel is not a vacation. It requires the traveller to research, plan, and prepare for the trip – with or without the help of a facilitator.

“A smart health traveller is an informed health traveller,” says Woodman. “Right now, we have a global clearing house of information, and it is impossible to immediately find the best doctor. So you’ve got to do your homework.

While using the Internet in your initial research is a good start, you will need to check the facts and claims offered by websites (often sponsored) against other trusted sources, such as your doctors, your friends, or credible newspapers and magazines.

“You’ve got to know there are risks involved. You have to know what you have to do when you come back home, what to prepare for your trip, and how to digitise your medical records you’ve already sent to the practitioner abroad. You will also need to inform your hometown doctor so when you come home he is able to provide you care,” he adds.

Most importantly, you must take time to get to know your physician either directly or through your medical travel agent. “Don’t be afraid to ask questions, lots of them, until you feel comfortable that you have chosen a competent physician,” Woodman writes.

Having gone through the ups and downs of managing his own medical trip abroad, Cook returned to Atlanta satisfied and impressed with the care he had received. He didn’t hesitate when asked whether he would recommend his friends to seek medical treatment overseas. “Absolutely,” he replies.

But his advice would be, “Use a medical tourism facilitator and have someone go with you.”

Date : 2 May 2010

Source :

<http://thestar.com.my/health/story.asp?file=/2010/5/2/health/6152063&sec=health>