

Travelling for treatment (medical tourism)

Information for people thinking about travelling abroad for medical treatment, surgery, dental care or fertility procedures

Key messages

- Individuals considering travelling for treatment should discuss their plans carefully with their UK doctor, dentist and/or hospital specialist before committing to any procedure abroad.
- Travellers should speak directly to the health professional undertaking the planned treatment before travel and check their qualifications and references independently.
- Medical advice from a travel agent or administrator is unacceptable.
- Travellers should see their GP, Pharmacist, Practice Nurse or Travel Clinic prior to travel to check if vaccines and/or malaria tablets are recommended for their destination.
- Appropriate travel medical insurance is essential.

Overview

United Kingdom (UK) residents travelling abroad for medical treatment, elective (planned) surgery and dental procedures may be at increased risk of complications, including exposure to blood-borne viruses. They may also be unaware of the potential health and financial consequences they could face [1]. Medical tourism has been defined as the practice of travelling to another country to access paid medical care [2].

Travelling overseas for treatment is becoming more common amongst UK residents. The Office for National Statistics (ONS) estimated that approximately 248,000 UK residents travelled abroad for medical treatment during 2019. This is an increase from 2018 when 151,609 UK residents travelled abroad for treatment [3].

In 2022, the ONS estimated that 348,000 UK residents travelled abroad for treatment [4].

Treatments can include dental and cosmetic surgery, cancer treatment, weight loss surgery, fertility



treatment, organ transplants and stem cell therapy [5]. Transgender travellers may seek hormone therapy and gender reassignment surgery abroad.

A number of factors may have contributed towards this growth in medical tourism. These include improved disposable incomes, increased readiness to travel for health care, low-cost air travel and the expansion of internet marketing [1].

Risk for travellers

The <u>British Association of Aesthetic Plastic Surgeons</u> consistently advises against travelling abroad for any kind of surgery, not just cosmetic. They counsel that all surgical procedures carry risks, even when performed by a reputable surgeon in the UK. They also state that the possibility of complications increases considerably with travel, which limits the availability of aftercare [6].

The Foreign, Commonwealth and Development Office (FCDO) advise they are aware of six British nationals who died in Turkey in 2023 following medical procedures. Some British nationals also experienced complications and needed further treatment or surgery following their procedure [7]. There have also been reports of an outbreak of botulism linked to weight loss treatments carried out in Izmir and Istanbul in Turkey in February 2023 [8].

The Human Fertilisation and Embryology Authority advise UK residents planning fertility treatment abroad to do as much research as possible before booking treatment, as not all countries regulate fertility treatment in the way the UK does [9].

UK dentists have reported concerns about the quality of commercial dental treatment carried out in some countries and the lack of continuity of care. The British Dental Association strongly advise anyone considering treatment abroad to check a dentist's qualifications and experience and whether they are insured if things go wrong [10].

The British Obesity and Metabolic Surgery Society strongly advise UK residents to be cautious when considering weight loss (bariatric surgery) abroad. They are increasingly concerned at the number of people experiencing complications from surgery performed outside the UK. Weight loss surgery is complex and needs specialist long-term support, with lifelong annual reviews. When complications occur with overseas weight loss surgery, there may be an assumption that the NHS can sort out any issues. However, this is not always straightforward, and has resulted in severely ill patients being medically evacuated back to the UK to attend their local accident and emergency department [11].

Some UK residents will still choose to travel abroad for medical and dental treatment and require appropriate advice and counselling about the associated risks. Individuals of all ages and social groups travel for treatment [1]. Most medical tourism is arranged and funded by travellers themselves. Private agencies usually refer tourists to hospitals and clinics, with flights and accommodation often included as part of a package holiday.



Cosmetic treatments abroad have been associated with complications, including harmful reactions after receiving botulinum toxin injections from unlicensed or untrained individuals [12]. Exposure to blood borne viruses such has HIV have also been linked to "microneedling" cosmetic treatments [13].

In some situations, such as delays in treatment, the NHS may agree to pay for treatment abroad. However, this is very unusual and would not usually cover dental care or plastic surgery. The NHS has information about going abroad for medical treatment.

While specific risks of medical tourism depend on regions visited and procedures performed, some general issues have been identified:

- Antibiotic resistance: a global problem and resistant bacteria may be more common in some regions.
- Inappropriate or unnecessary treatment.
- Communication problems.
- Counterfeit (fake) or poor-quality medication in some countries.
- Risk of exposure to blood-borne diseases, such as hepatitis B and HIV or other infections such as <a href="https://doi.org/both.com/bo

The cosmetic surgery, medical and dental tourism industry is almost entirely unregulated, and this has potential risks for those travelling out of the UK. Existing information about travelling abroad for treatment is variable and there is no authoritative and trustworthy single source of information [1].

People with progressive or chronic illnesses may be vulnerable to exploitation by providers of unproven and untested drug regimens and interventions abroad. Patients travelling for untested treatment can be exposed to additional safety risks due to the nature of the intervention and may face high financial burdens for potentially ineffective treatment [2].

Long-distance air travel post-surgery is thought to increase risk of <u>venous thromboembolism</u> (deep vein thrombosis or pulmonary embolism). Individuals travelling for organ transplants may be more at risk of severe infectious complications because of inadequate screening protocols overseas and higher infection rates [11].

Many countries offering medical tourism programmes are in tropical or subtropical regions where malaria, dengue fever, enteric fever and other diseases are a risk. High rates of infections like hepatitis B, hepatitis C, HIV and TB are found in some countries [15]. Antibiotic resistance may also be a concern [16].

Before travel

Careful planning and preparing can help reduce risks associated with treatment abroad. Travellers should be encouraged to consider the impact of treatment overseas, away from friends, family and



usual support networks, especially if complications occur or a prolonged stay is required.

Travellers need to consider their destination country's entry requirements, including medication restrictions, and for some countries, the need to obtain a visa prior to travel. Further information is available from the <u>Foreign Commonwealth & Development Office foreign travel advice</u>.

Individuals planning overseas treatment are advised to use internationally accredited clinics or hospitals, although using an accredited clinic or hospital does not guarantee a satisfactory outcome [4].

Examples of accrediting bodies include <u>Joint Commission International</u>, and the <u>International</u> <u>Society for Quality in Healthcare</u>.

- Individuals planning treatment abroad should discuss any planned procedures with their GP and/or specialist **before** booking any treatment and ensure they are fit to travel.
- Travellers should consult their GP, Pharmacist, Practice Nurse or Travel Clinic to check if they need vaccines and malaria tablets, and for any other destination-specific advice, as soon as they have decided to travel.
- The destination clinician will need to be informed of any malaria prophylaxis, in case of interaction with the procedure, or any medication prescribed.
- The health professional carrying procedures abroad should be available to talk to the traveller (via telephone or video call). This consultation should provide a clear explanation of the planned treatment, including success/complication rates, potential risks and possible post-procedure problems.
- The traveller should ask to meet former patients once they arrive at their destination.
- Medical advice from an administrator, a travel agent, or member of a sales team is not acceptable.
- Qualifications and credentials should be independently verified and references should be requested prior to travel. Membership of specialist medical or dental organisations may indicate certain standards of care.
- A written contract from the clinic or hospital should be provided. This should include a clear treatment plan, with responsibility for all costs, including additional treatments, aftercare, dressings, drugs including discharge medication, extended stay, nursing care and local follow up.
- A <u>European Health Insurance Card (EHIC)</u> or <u>Global Health Insurance Card (GHIC)</u> does not
 cover the cost of planned treatments. These cards cover state healthcare, for emergency or
 necessary medical care in some countries, at a reduced cost or sometimes for free. Check
 the <u>GOV.UK</u> website for guidance.
- Inclusive medical insurance that covers all potential complications, including the cost of medical evacuation back to the UK, must be obtained.
- Travellers accessing treatment in a country where they cannot speak the language must consider how they will communicate. It is reasonable to ask if a 24-hour interpreting service is available. Learning basic phrases and carrying a local language dictionary is also recommended.
- Healthcare regulation is less strict in some regions than in the UK and many countries have



no laws to protect patients if things go wrong. Travellers should consider this when choosing their destination, as legal help may be difficult to access in some countries.

During travel

- On arrival, travellers should ask to be shown around the clinic or hospital where the
 treatment is due to take place. They should be satisfied with cleanliness, hygiene and safety
 standards.
- Travellers should be satisfied that staff are appropriately educated, trained and experienced, and that the organisation has adequate indemnity insurance.
- If the traveller has any concerns, they should not proceed with the treatment.
- A pre-procedure medical consultation should take place, with the opportunity to meet former patients afterwards.
- Prior to any procedure, the traveller should check that appropriate medication, including pain relief, has been prescribed.
- Fitness to fly post-procedure should be established by the traveller's doctor or dentist. Potential risks of flying after surgery, especially in regard to long flights and thrombosis, should be considered and any appropriate prophylaxis prescribed. There may be issues regarding airline carriage of a recuperating traveller.
- Travellers should ensure they have copies of all overseas medical records, including x-rays and scans, before departure [4].
- Travellers should carefully consider who will care for them during their journey and once they have returned home.

After travel

Follow-up care might not be easily available and may not be covered by the NHS.

When things go wrong abroad, patients may have little or no options, other than arranging additional treatment at their own expense. In many instances, they are referred to the NHS for complications that may appear weeks or even months after a procedure [1].

Resources

- British Association of Aesthetic Plastic Surgeons: Consumer Safety Guidelines
- British Association of Plastic Reconstructive and Aesthetic Surgeons: Cosmetic Surgery Abroad
- Foreign, Commonwealth & Development Office: Lesbian, Gay, Bisexual and Transgender foreign travel advice. Advice for transgender travellers going overseas for medical treatment
- General Dental Council: Going abroad for your dental care?
- Human Fertilisation and Embryology Authority: Fertility treatment abroad issues and risks
- British Association of Aesthetic Plastic Surgeons: Cosmetic Tourism: What You Need To Know



- Medicines and travel
- NHS: Cosmetic surgery abroad
- NHS: Healthcare abroad
- NHS: Treatment abroad checklist
- Royal College of Surgeons: Thinking of Having Cosmetic Surgery abroad?
- <u>Travel Insurance</u>
- Venous thromboembolism
- University of Leeds: Sun, Sand, Sea and Silicone

REFERENCES

- 1. Lunt N, Smith R, Mannion R et al. Implications for the NHS of inward and outward medical tourism: a policy and economic analysis using literature review and mixed methods approaches. Health Serv Deliv Res 2014;2(2)
- 2. Synder J, Adams K, Chen Y et al. Navigating physicians' ethical and legal duties to patients seeking unproven interventions abroad. Canadian Family Physician July 2015 vol. 61 no. 7 584-586
- **3.** Office for National Statistics. Medical Tourism in 2019 and total visits to and from the UK 2015 to 2019. 12 October 2020. [Accessed 17 June 2024]
- **4.** Office for National Statistics. Visits to and from UK for the purpose of medical treatment, 2022. 24 March 2023. [Accessed 17 June 2024]
- **5.** Crist M, Appiah G, Leidel L et al. Medical Tourism. In: US Centers for Disease Control (CDC) 'Yellow book' Health Information for International Travel. Last reviewed 1 May 2023. [Accessed 17 June 2024]
- **6.** <u>British Association of Aesthetic Plastic Surgeons. Statement on ASA Ruling for Medical Tourism. Updated 27 March 2019. [Accessed 17 June 2024]</u>
- 7. Foreign, Commonwealth and Development Office. Foreign travel advice. Turkey. Health. Last updated 17 May 2024. [Accessed 17 June 2024]
- 8. World Health Organization. latrogenic Botulism- European Region. 24 March 2023. [Accessed 17 June 2024]
- 9. <u>Human Fertilisation and Embryology Authority</u>. Fertility treatment abroad. <u>Undated</u>. [Accessed 17 June 2024]
- **10.** British Dental Association. UK dentists picking up the pieces from dental tourism boom. 14 July 2022. [Accessed 17 June 2024]
- **11.** British Obesity and Metabolic Surgery Society. Statement on going abroad for weight loss surgery. January 2023. [Accessed 17 June 2024]
- **12.** <u>US Centers for Disease Prevention and Control. Harmful Reactions Linked to Counterfeit "Botox" or Mishandled Botulinum Toxin Injections.</u> 13 May 2024. [Accessed 17 June 2024]
- 13. US Centers for Disease Prevention and Control. Investigation of Presumptive HIV Transmission Associated with Receipt of Platelet-Rich Plasma Microneedling Facials at a Spa Among Former Spa Clients New Mexico, 2018-2023. 25 April 2024. [Accessed 17 June 2024].
- 14. Crooks V, Turner L, Cohen I et al. Ethical and legal implications of the risks of medical tourism for patients: a qualitative study of Canadian health and safety representatives' perspectives. BMJ Open 2013;3:e002302 doi:10.1136/bmjopen-2012-002302. [Accessed 17 June 2024]
- **15.** Chen L and Wilson M. The Globalization of Healthcare: Implications of Medical Tourism for the Infectious Disease Clinician Clin Infect Dis. (2013) 57 (12): 1752-1759 first published online 13 August 2013 doi:10.1093/cid/cit540. [Accessed 17 June 2024]



16. European Centre for Disease Prevention and Control. Rapid Risk Assessment. Carbapenem-resistant Enterobacteriaceae. 27 September 2019. [Accessed 17 June 2024]

Published Date: 27 Mar 2023

Updated Date: 17 Jun 2024