

British medical tourists seeking treatment overseas without sufficient information and advice

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A team of researchers (including [Russell Mannion \(/staff/profiles/social-policy/mannion-russell.aspx\)](#) and [Mark Exworthy \(/staff/profiles/social-policy/exworthy-mark.aspx\)](#) from HSMC) has found that British people travelling abroad for medical treatment are often unaware of the potential health and financial consequences they could face.

The researchers say this can, in some cases, have catastrophic effects for individual patients.

At least 63,000 UK residents travel abroad for medical treatment each year. However, the study led by the University of York, and involving the London School of Hygiene & Tropical Medicine, Royal Holloway University, the University of Birmingham and Sheffield Teaching Hospitals NHS Trust, concludes that many people are embarking on medical tourism without understanding the risks involved.

These include a lack of redress in many countries should things go wrong, and the costs of non-emergency care at home to rectify poor outcomes of treatments received overseas. Many people, the researchers say, are unaware that under current NHS eligibility and commissioning rules, individuals may be personally liable for these costs.

The research was funded by the National Institute for Health Research Health Services and Delivery Research (NIHR HS&DR) Programme. The study looked at the effects on the NHS of British nationals going abroad for services including dentistry, bariatric (weight-loss) surgery, fertility services and cosmetic surgery.

Principal Investigator Dr Neil Lunt, from the University of York's Department of Social Policy and Social Work, said: "We found that many people are embarking on medical tourism with insufficient information and advice, with consequences ranging from troublesome to catastrophic. A sample of patients revealed that while some patients had minor or no problems following treatment abroad, others faced severe health problems which in some cases were exacerbated by an inability to ensure continuity of care or obtain patient records to address patients' needs."

The researchers conclude that GPs need support and training to enable them to advise patients not only on the broad consequences of medical tourism, but also the implications of specific forms of treatments which may present particular concerns. Bariatric (weight-loss) surgery and fertility treatment are highlighted as particular areas of concern.

They also recommend that more information and advice is provided to potential medical tourists. This, they say, needs to be packaged and disseminated so it will reach those who may not consult their GP or a specialist website before travelling.

Dr Johanna Hanefeld, Lecturer in Health Systems Economics at the London School of Hygiene & Tropical Medicine, said: "The people we interviewed are sometimes far from 'empowered consumers' and are failed by the current system. There is a real need for urgent policy action to address the gap in information that exists for people travelling for treatment."

The medical tourism study 'Implications for the NHS of Inward and Outward Medical Tourism' addressed four interrelated themes: patient decision-making; quality, safety and risk; economic implications; and provider and market development.

The researchers found that decision-making around outward medical travel involves a range of information sources, with the internet and information by informal networks of friends and peers, playing key roles. They conclude that medical tourists often pay more attention to 'soft' information rather than hard clinical information. They also found that there is little effective regulation of information – be it hard or soft – online or overseas.

Dr Daniel Horsfall, from the University of York's Department of Social Policy and Social Work, said: "We found that people travelling abroad for medical treatment are often ill-informed or under-informed and this heightens the risks associated with medical travel. For example, we found individuals willing to travel for treatments to locations that are not regulated by national laws and guidelines."

Professor Mark Exworthy, who recently joined the University of Birmingham from Royal Holloway, University of London, said: "The rise of 'medical tourism' presents new opportunities and challenges in terms of treatment options for patients and health policymakers in all countries. This study helps clarify the scale and nature of these challenges for the UK. Whilst there remains much doubt about the extent and impact of medical tourism, it is likely that these issues will become more salient in the coming years."

ENDS

Notes to editors:

The report 'Implications for the NHS of Inward and Outward Medical Tourism' (HSR 09/2001/21) will publish on the NIHR Journals Library website on 4 February 2014.

- The project was funded by the National Institute for Health Research Health Services and Delivery Research Programme (project number 09/2001/21). The National Institute of Health Research [Health Services and Delivery Research \(NIHR HS&DR\) Programme \(http://www.nets.nihr.ac.uk/programmes/hsdr\)](#) was established to fund a broad range of research. It builds on the strengths and contributions of two NIHR research programmes: the [Health Services Research \(HSR\) programme \(http://www.nets.nihr.ac.uk/programmes/hsdr\)](#) and the [Service Delivery and Organisation \(SDO\) programme \(http://www.nets.nihr.ac.uk/programmes/hsdr\)](#), which merged in January 2012. The programme aims to produce rigorous and relevant evidence on the quality, access and organisation of health services, including costs and outcomes. The programme will enhance the strategic focus on research that matters to the NHS. The HS&DR Programme is funded by the NIHR with specific contributions from the CSO in Scotland, NISCHR in Wales and the HSC R&D Division, Public Health Agency in Northern Ireland.
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- This article presents independent research funded by the National Institute for Health Research (NIHR). The views expressed are those of the author(s) and not

necessarily those of the NHS, the NIHR or the Department of Health.

- For further information on the University of York's **Department of Social Policy and Social Work** (<http://www.york.ac.uk/spsw/>).
- The **London School of Hygiene & Tropical Medicine** (<http://www.lshtm.ac.uk/>) is a world-leading centre for research and postgraduate education in public and global health, with 3,500 students and more than 1,000 staff working in over 100 countries. The School is one of the highest-rated research institutions in the UK, and was recently cited as one of the world's top universities for collaborative research. The School's mission is to improve health and health equity in the UK and worldwide; working in partnership to achieve excellence in public and global health research, education and translation of knowledge into policy and practice.

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