

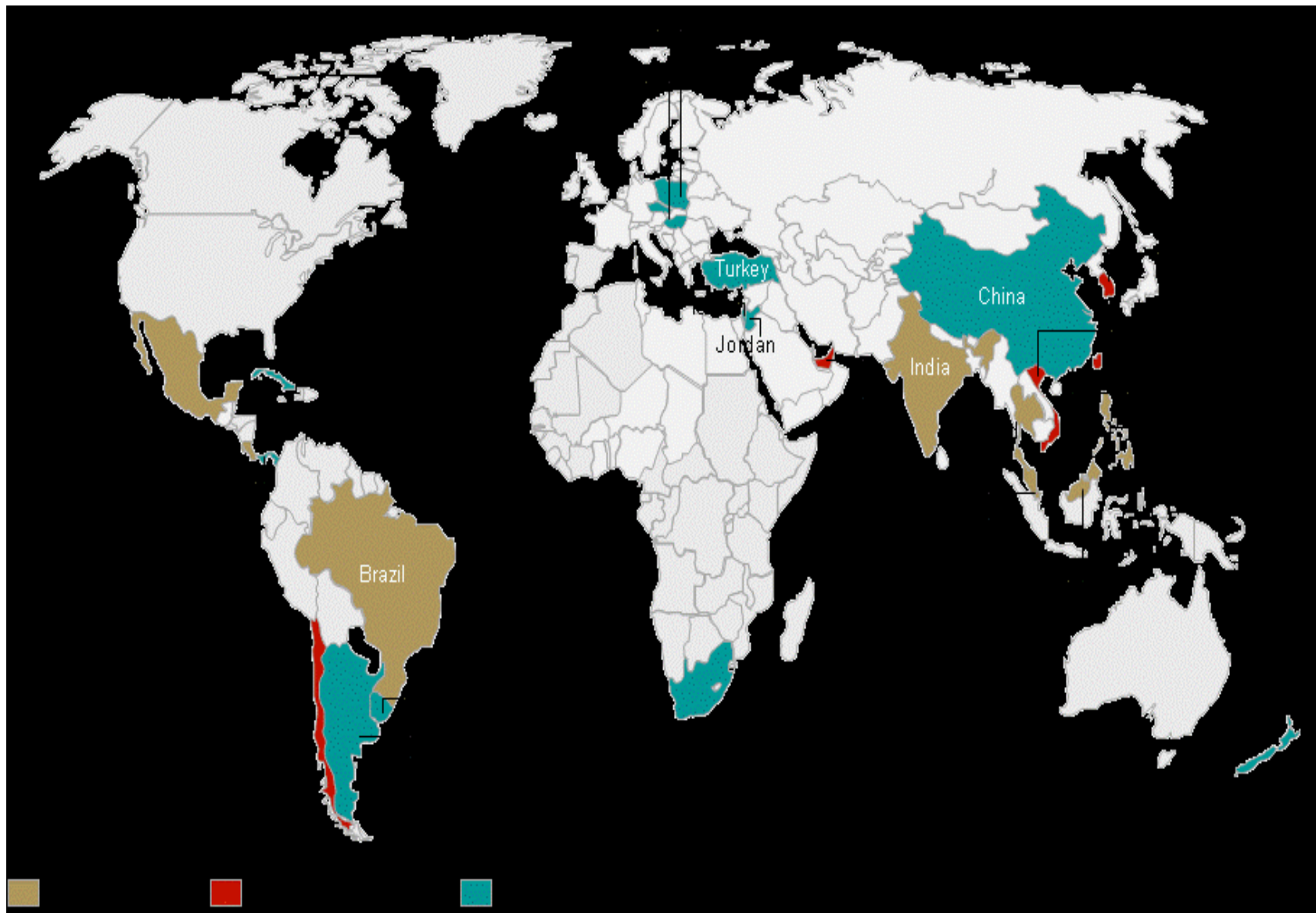


MEDICAL TOURISM INDUSTRY IN TUNISIA

**Chérifa LAKHOUA – CERP Team
University of Carthage**

WORLD STATUS AND STATISTICS IN MEDICAL TOURISM INDUSTRY

- The international healthcare marketplace emerged in the late 19th century when patients from LDC began to travel to medical European and US centers to have diagnostic evaluation and treatment that was unavailable in their own countries
- Since some years the flow was inversed , a medical tourism model was born, where patients from DC travel to LDC, bypassing medical care that is offered in their own country but is inaccessible or undesirable to them.



WORLD MEDICAL TOURISM STATUS AND STATISTICS

- Even if patients would prefer to have major surgery in their hometown hospital or regional referral center, however, they feel pressed to balance their health needs against other considerations, and medical concerns may be subordinated to other issues.
- Modern technology enables potential medical tourists to investigate and arrange healthcare anywhere in the world from their home computer directly or with the advice and assistance of a medical tourism agency.

World Medical tourism Status and statistics

- In the last years medical tourism industry has captured the interest of the media.
- A *Google* Internet search using the term “medical tourism” performed on march 10, 2012, returned about 97,900,000 results an increase of 96,800,000 relative to results of July 29, 2007.
- The mean is about 19,360,000 by a year : an annual increase of nearly 20% that is the comparable to the increase of international medical travelers in the world.

Most identified countries in literature and Internet search in MT field

Asia/Middle East	The Americas	Europe	Africa	Other
China	Argentina	Belgium	South Africa	Australia
India	Brazil	Czech Republic	Tunisia	Barbados
Israel	Canada	Germany		Cuba
Jordan	Colombia	Hungary		Jamaica
Malaysia	Costa Rica	Italy		
Singapore	Ecuador	Latvia		
South Korea	Mexico	Lithuania		
Philippines	United States	Poland		
Taiwan†		Portugal		
Turkey		Romania		
United Arab Emirates		Russia		
		Spain		

Statics in some destinations of medical tourism

There are no verifiable and precise statistics regarding the magnitude of medical tourism, but the available information suggests that a substantial number of patients travel to developing nations for healthcare

Country	Nber of medical traveler	Year
THAILAND	1,200,000	2006
INDIA	450,000	2007
SINGAPOR	410,000	2006
MALAYSIA	300,000	2006
TUNISIA	176,000	2010
LATIN AMERICA	150,000	2006
MEXICO	80,000	2006
TOTAL	2,766,000	----



MOTIVATIONS TO BE A MEDICAL TRAVELER

according to Mc Kinsey, R. Cook, Horowitz & co and Grail research

Costs of medical procedures is the main motivation

- All the studies consider that medical travelers are seeking cheapest medical procedure only Mc Kinsey report (may 2008) don't support this idea
- For Mc Kinsey only 9% of medical tourists are seeking for low costs, according this study a lack of health insurance is the most common factor to seek lower costs for medical travel. Scholars estimates to 61 millions US people who are uninsured or underinsured

Costs of medical procedures is the main motivation

- Large Uninsured Population :
 - 46 million US people have no health insurance
 - Even people with health insurance must pay out of pocket for elective surgery and “pre-existing conditions »
 - A large number of medical tourists seek out elective procedures such as cosmetic or wellness treatments that are not covered by insurance plans.
- This main reason can make patients choose to accept the inconvenience and uncertainties of offshore healthcare to obtain service at prices they can more comfortably afford.

Costs of medical procedures is the main motivation

- Costs of procedures in India average 80% less than the same procedures would cost in USA.
- Thailand, Singapore, Brazil, Costa Rica, Hungary, Singapore, Malaysia, and South Africa also attract a sizable number of US citizens for medical procedures each year, in all of those places, one can save anywhere from 50 to 80 % on procedures.
- In Tunisia the US or European patients can save 40 to 80% on procedures
- As the Centers for Disease Control states in its 2010 Yellow Book:
 - “a heart bypass in Thailand costs \$11,000 compared to as much as \$130,000 in the U.S.
 - Spinal fusion surgery in India at \$5,500 compares to over \$60,000 in the U.S.
 - ” even with travel costs added in, Americans going abroad stand to save quite a bit of money.

Costs of medical procedures in LDC

In the more important MT destinations, Some comparative prices

Procedure	USA	THAILAND	INDIA	TUNISIA
Hip replacement	€18,260	€ 7,600	€ 4,800	€4,900
Breast augmentation	€ 7,600	€ 2,400	€ 1,700	€2,000
Coronary angioplasty	€ 31,200	€ 3,200	€ 2,700	€2,500

Medical travelers seek advanced technology and quality

- **Mc Kinsey report states that 40% of medical travelers seek advanced technology and quality**
 - the quality of health care in popular medical tourist destinations is generally quite good.
 - The same Joint Commission International that accredits organizations in USA has an international affiliate (Joint Commission International) which has accredited 250 hospitals in 36 countries. Brazil, for example, has 12 JCI accredited organizations.
 - Since 1999, approximately 450 public and private health care organizations in 50 countries have been accredited or certified by JCI

- In Tunisia there is no JCI accredited hospitals but 4 private hospitals are certified ISO and OHSAS.
- **Almost 150 hospitals abroad are certified by ISO and JCI. Furthermore, some countries are implementing their own authorization criteria.**

JCI accreditation in some similar countries

Country	Hospitals JCI accredited
TURKEY	46
SAUDI ARABIA	43
QATAR	7
BAHRAIN	1
EGYPT	3
OMAN	1
NIGERIA	1
YEMEN	1
LEBANON	2
KUWAIT	2
JORDAN	12

Medical travelers seek privacy and confidentiality

- Some patients, particularly those undergoing plastic surgery, sex change procedures, and drug rehabilitation, choose to go to medical tourism destinations because they are more confident that their privacy and confidentiality will be protected in a faraway setting.
- **32% seek better healthcare.** When selecting a destination, such patients trade off perceived quality against burden such as costs, distances and unfamiliar cultures. Some of them disregard costs for some degree, others are looking for higher quality at the best available price. Patients in this segment seek care in several different specialties, particularly cardiology.

Long waiting time to have medical care in develop countries

- According to Mc Kinsey report **15% seek faster medical services**
- **Long Waiting Time**
 - Patients in the UK and Canada lack timely access to elective procedures and hence travel to other countries
 - The average waiting time for patients undergoing joint replacement surgery, cataract surgery, CABG surgery, and MRI examination in Canada is 253 days, 128 days, 71 days, and 29 days, respectively
- Finally, some patients have medical care abroad for the opportunity to travel to exotic locations and vacation in affordable luxurious surroundings.



MEDICAL TOURISM IN TUNISIA

CARACTERISTICS OF MEDICAL TOURISM

○ STRENGTHS

- The geographical situation of Tunisia is a strength
- At 2000 Km from Southern European countries
- Developement of touristic network and its competitiveness (see tab below) : a new private hospital with more than 300 beds was implemented in Tunis at 2011 specialised in cancerology.
- Moderate weather
- A relatively developed medical network with high qualifications in medical technologies
- Fast medical services
- Competitive prices in many medical procedures

○ WEEKNESSES

- Among 78 private hospitals in Tunisian health care facilities, only 3 4 that are certified ISO 9002
- No private hospital have a JCI accreditation in Tunisia.

MEDICAL FACILITIES IN TUNISIA

Facilities	1987	2009	2010
Main hospitals, specialised centers and university hospitals	20	29	30
Regional hospitals	22	34	34
Local hospitals and maternities	99	109	109
Public beds	15000	19258	19565
Basic Health Centers	1359	2085	2088
Hemodialysis public centers	3	35 (2 military)	38 (2 military)
Hemodialysis para public centers (CNSS)		6	6
Private Hemodialysis centers		99	99
Centres d'imagerie médicale		44	54
Private hospitals	28	77	77
Private Beds	750	3028	3028
Private medical practices		5865	6273
Physicians (private and public)	3500	12450	(48%)
Dentists	700	2530	

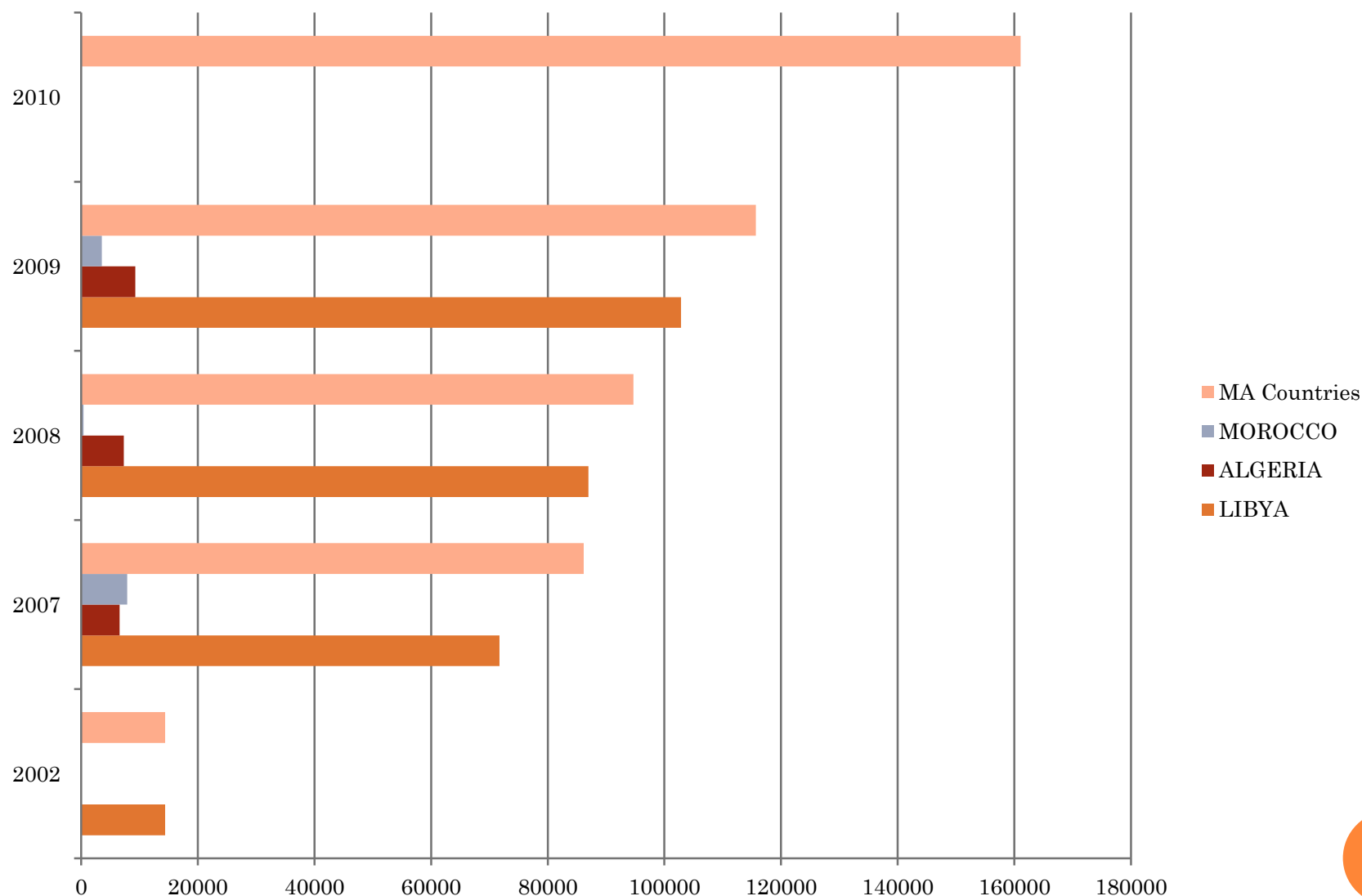
Procedure	Speciality
Cosmetic Surgery	Breast augmentation/mastopexy/breast reduction
	Facelift/blepharoplasty
	Liposuction/body contouring
Dentistry	Cosmetic dentistry
	Dental reconstruction/prosthodontics
Cardiology and Cardiac Surgery	Coronary artery bypass
	Cardiac valve replacement/reconstruction
	Percutaneous coronary angioplasty/stenting
	Stem cell therapy for heart failure
Orthopaedic Surgery and Spine Surgery	Hip replacement/resurfacing
	Knee replacement
	Arthroscopy/joint reconstruction
	Laminectomy/spinal decompression
	Disk space reconstruction/disk replacement

Speciality	Procedures
Bariatric Surgery	Gastric bypass
	Laparoscopic adjustable gastric banding (<i>Lap-Band</i> ; Inamed/Allergan, Inc.; Irvine, California)
	Body contouring subsequent to massive weight loss
Reproductive System	In vitro fertilization
	Hysterectomy
	Prostatectomy/transurethral resection
	Gender reassignment procedures
Organ and Tissue Transplantation	Solid organ transplantation
	Renal
	Hepatic
	Bone marrow transplantation
Other Services	LASIK eye surgery
	General medical evaluation/checkup
	Wide range of diagnostic studies

NORTH AFRICAN AND AFRICAN PATIENTS IN TUNISIA

Origin Country of patients	2002	2007	2008	2009	2010
LIBYA	14390	71734	86982	102872	
%	-	398%	21%	18%	
ALGERIA	-	6586	7290	9284	
%	-	-	11%	27%	
MAROCCO	-	7864	400	3527	
%	-	-	-95%	782%	
MA Countries	14390	86184	94672	115683	161100
%	-	499%	10%	22%	39%
AFRICAN COUNTRIES	-	1894	3332	5276	6500
%	-	-	76%	58%	23%

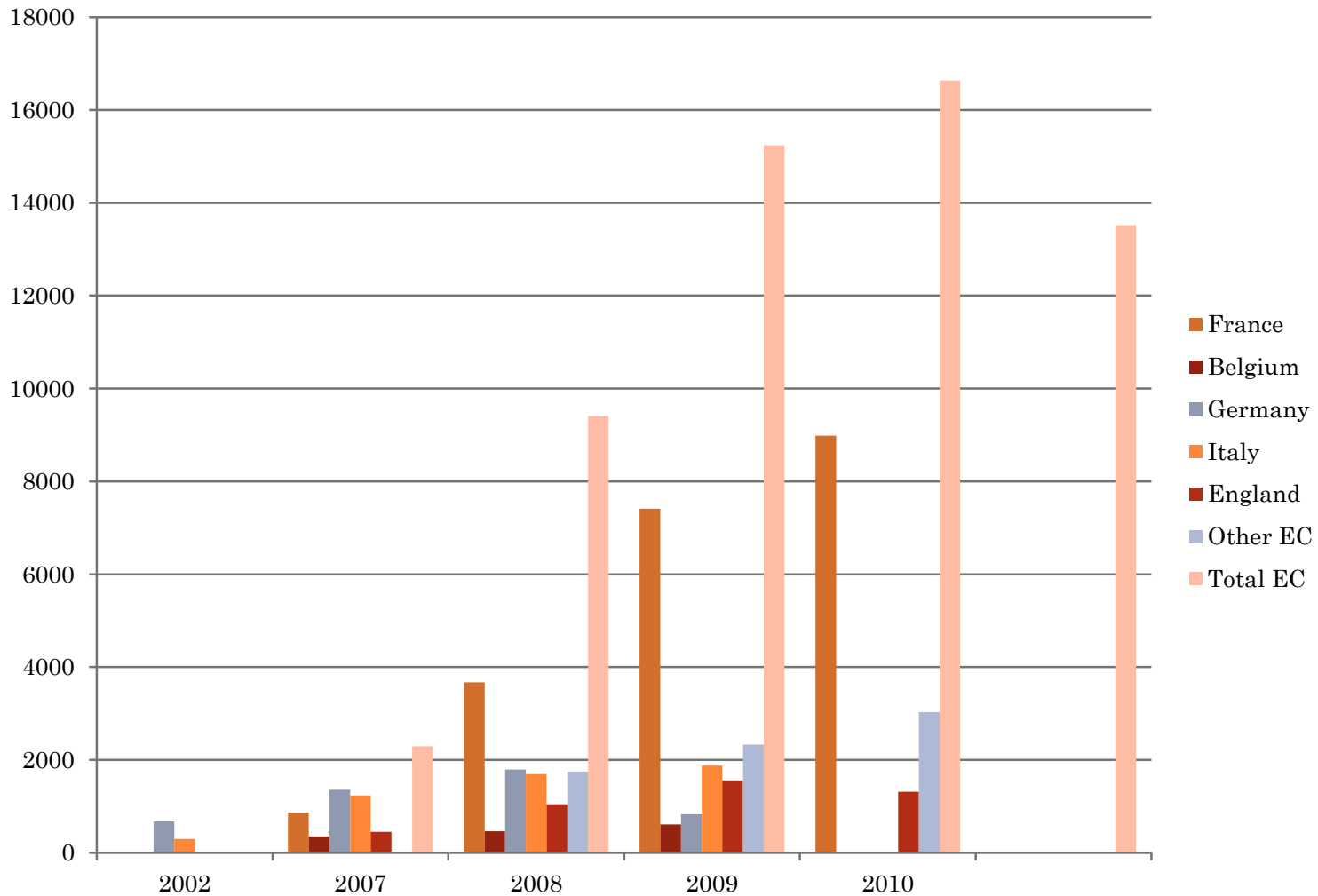
NUMBER NORTH AFRICAN PATIENT BY COUNTRY OF ORIGIN



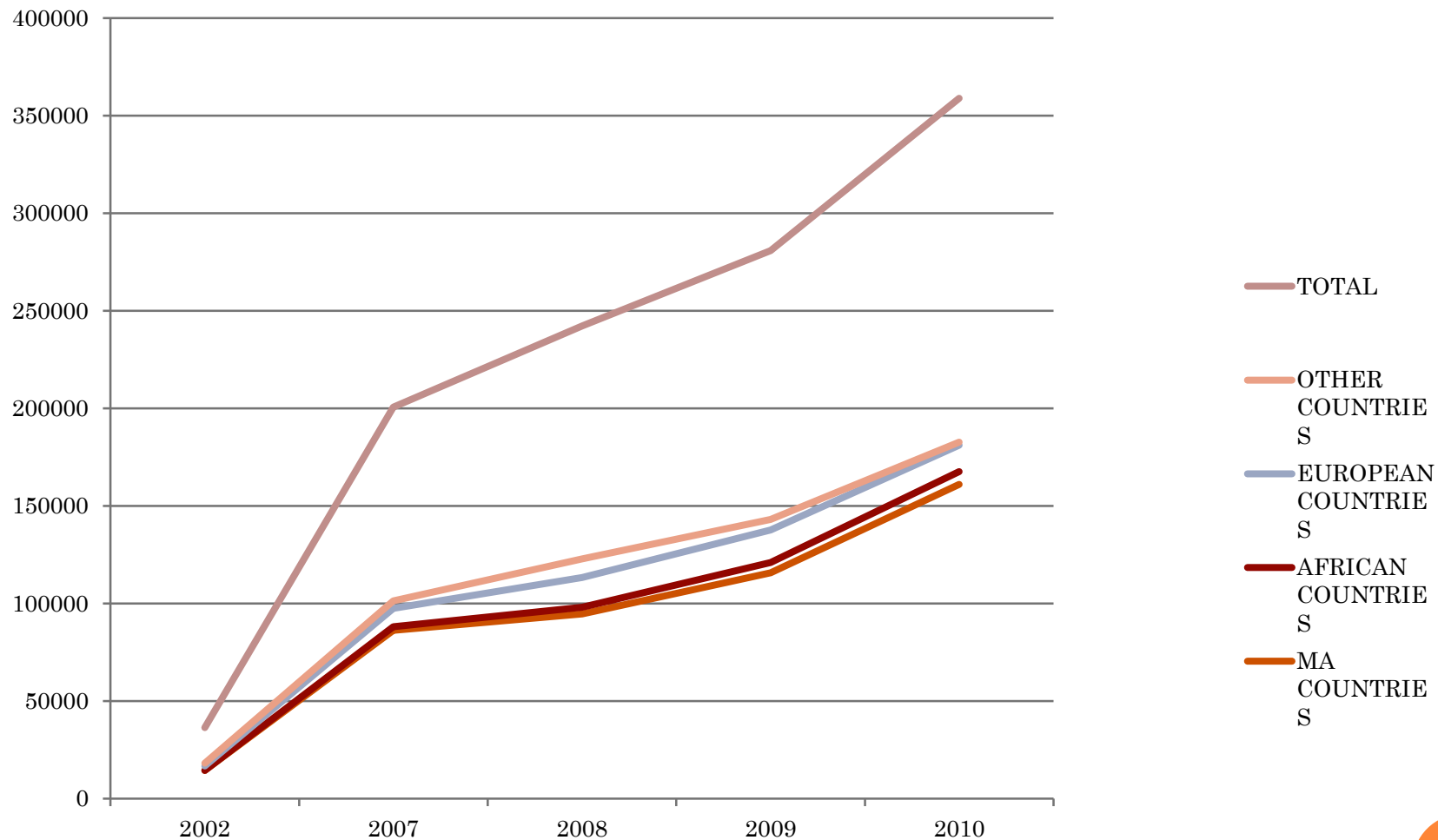
EUROPEAN PATIENTS IN TUNISIA

Origin Country of patients	2002	2007	2008	2009	2010
FRANCE	865	3669	7409	8983	
%	-	324%	102%	21%	
BELGIUM		355	463	607	
%	-	-	30%	31%	
GERMANY	678	1356	1793	828	
%	-	100%	32%	-54%	
ITALY	297	1234	1692	1878	
%	-	315%	37%	11%	
ENGLAND	451	1043	1559	1315	
%	-	131%	49%	-16%	
OTHER EUROPEAN COUNTRIES		1749	2328	3029	
%		-	33%	30%	

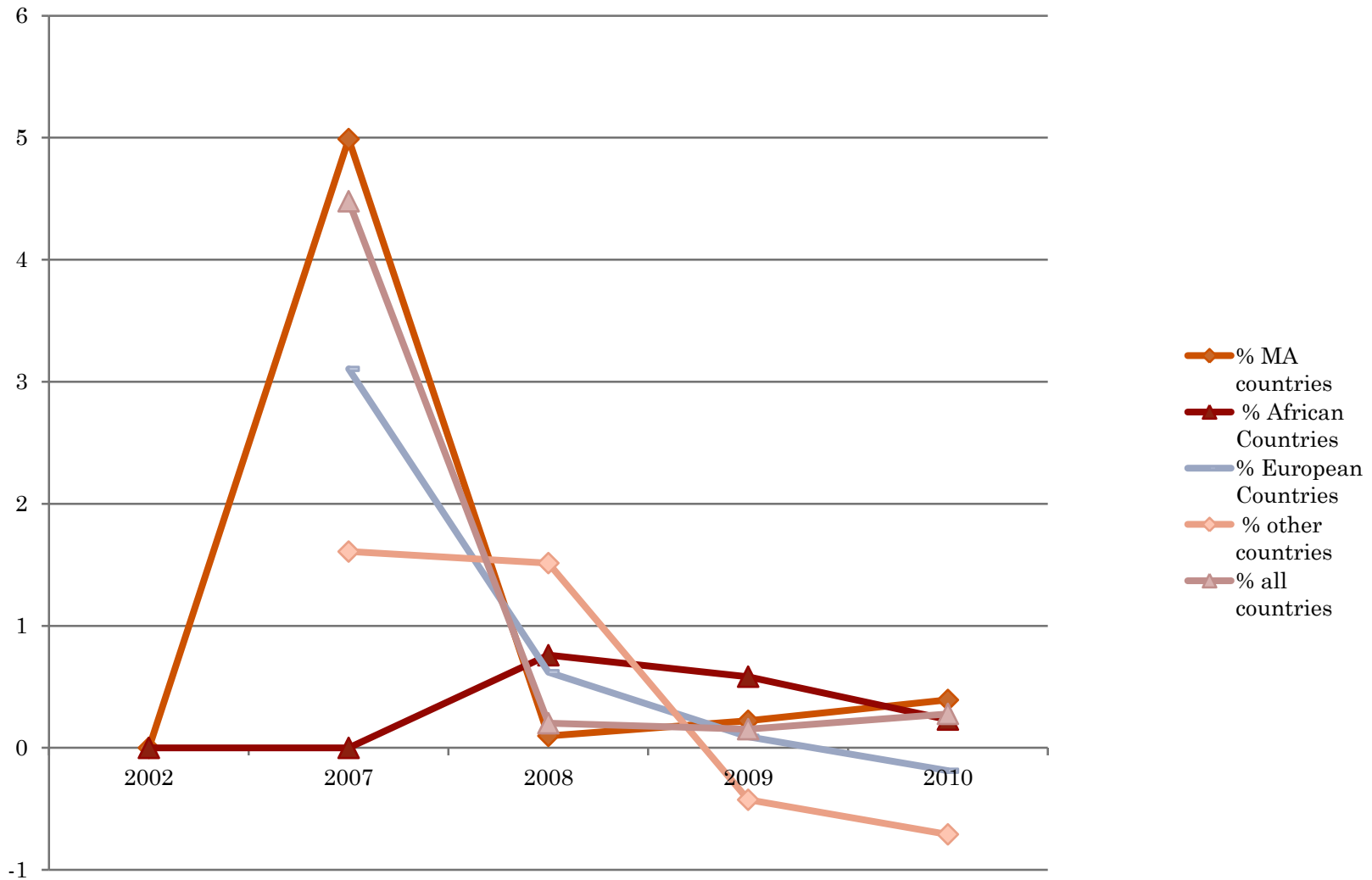
Number of European patients in Tunisia



NUMBER OF PATIENTS BY COUNTRY OF ORIGIN (2002- 2010)



% EVOLUTION BY COUNTRY OF ORIGIN



THANK YOU FOR ATTENTION