Medical tourism– the scoping review

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Abstract: The study reviewed the fundamental knowledge of what is medical tourism by proposed the background and evolution of medical tourism. This paper aggregated the definition of the term ‘medical tourism’ given by previous authors, although there are several interpretations, yet, remained no universal consensus on the medical tourism term. However, the aggregation in this paper showed that there is a share certain common features among the diversified definitions. The authors also reviewed what are the developments and the barriers in this global medical travel trend.

Keywords: Medical Tourism, Health Tourism, Wellness Tourism, Successful factor, Barrier

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I. Introduction

Medical tourism is the combining activities of products and services from medical and tourism industry together, i.e. healthcare and vacations. Across boarder for medical treatment enables outpatient patients to quickly and conveniently access health care services through travel, with appropriate prices and, oftentimes, at equal or better medical quality than they could in their home countries.

Over this recent year, the rise of this medical industry has particularly flourished in many developing countries, e.g. India, Thailand, Turkey, Singapore, Hong Kong, Malaysia, Taiwan, Korea. These countries are currently setting up legally and practically to capture this emerging market by offering high-class healthcare facilities and outstanding services quality, which significantly generates high revenue and contributes to the economy of each country. As a result, the trend of this overseas treatment has attracted interest in both the academic and professional communities giving significant attention to research and invest in the area of health-related service.

The term ‘medical tourism’ may easily mislead by the wide area of aesthetics and well-being though a more-business model. The exploration research by Tham[1] exposed that some people have never accustomed to this term and most of people interpreted with their own experience of the most dominant perspectives that medical tourism as the travelling overseas seeking for surgical procedures. Furthermore, in academic area suggested that there are no universal definition of this term.

Looking back on previous studies in medical tourism history suggests that there is a lacking of consensus on its defining concepts is a main barrier for its theoretical understanding and future development [2]. Therefore, this paper aims at broadening the knowledge regard to medical tourism area by provide an overview in the previous literature, discussing about what is medical tourism, the revolution of its, why it’s become phenomenal.

II. Background and Evolution of Medical Tourism

‘‘Medical Tourism’’ has become commonly known in the 21st century as the niche market in global health tourism. The phenomenon of people travelling out of their local place to the another place for receiving the medical care service have been rapidly popularize in Asia such as India, Thailand, Singapore, Korea, Malaysia, Hong Kong, Taiwan as a medical-tourist destination. Notwithstanding, travelling for health is nothing new [3-5]. Tract back in the history,[6] referring:

[. . .] The first world’s first recorded medical tourism industry started when Greeks and Romans headed to the mineral spring spas both to relax and to heal, with emperors Trajan, Septimius Severus, Maximilian and Justinian building up balneotherapeutic centers where patients treated diseases by bathing in hot mineral waters. So the opportunities for climatic treatment and balneotherapy have been used since way back.

Similarly with, Yu & Ko [7] mentioned to in the line of historical spring spa in Romans. The term of ‘‘traditional medical tourism’’ has been mentioned in Horowitz and Rosensweig[8] as it is a type of tourism that gaining the momentum of individuals in underdeveloped countries visiting developed countries owing to the lack of healthcare service, the lower medical technology and a dearth of qualified professionals in their home country [9].

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The flow of this trend is seem to be the outbound from lessdeveloped countries travel to seeking better or specialized health care in more developed nations. However, Connell [10] revealed that theperiod have been turn into a reversal trend in the baby boom generation. This baby boomers contributed peoplestriving for healthiness, which resulted in pursuit of wellness or well-being life. At that moment, most of health systems in developed nations confront with the higher medical expenses combined with long waiting-lists, hence the steadily growing number of people from upper-income countries travelling to lower- and middle-income countries for healthcare has been significant attention in recent years [11-12].

On the other hand, this emerging trend of medical touristhave been attracted significant attention to Asia top medical tourism destinations, relatively reason including a number of factors such as saving cost with the high class technology, time efficiency, affordability of airfares plus beautiful scenery overseas destinations. Furthermore, the medical industries in less developed countries typically invest in state-of-the-art medical technology and facilities and the quality of services for foreign customers[13]. People have more comfortably confidence travelling far from their home to medical destination they might not know, it is seem to possible thanks to the rise of the internet[14]helping foreign patients for gaining access to healthcare advertising, information and post-patients’ feedback. The new actor in this industry such the medical tourism agency or facilitator also as the intermediary supporting this rapidly growing supply chain[15].

The scope of ‘medical tourism’ has been debated on the literature. There is a consensus among authors considering medical tourism as a subset of health tourism [2]. Lunt & Carrera [16] identified that ‘medical tourism’ has emerged from thebroaderfield of health tourism. Moreover, the explication of health tourism by Connell [17] referred to the passive relaxation on the beautiful beaches, spas, yoga and rejuvenation treatment, the rise of people seeking medical care for; the general treatment (e.g. cosmetic surgery, dentistry and check-ups); the specific surgical procedures specialist (e.g. stem cell surgery, hip replacement, heart bypass), these various treatments have been broaden out health tourism. Although Wongkit& McKercher [18] and Smith and Puczko [19] expressed the different aspect of medical tourism represented a subset of the broader concept of wellness tourism. However, the implication of definition of health tourism given by Aydin &Karamehmet [9] as “People have been traveling from place of residence to another place to acquire all kinds of health-related services”. Broadly speaking, it could implied that health tourism is an umbrella covered all the relatively terms of medical tourism, wellness tourism and well-being tourism [9, 5, 20-24] and healthcare programs include medical care, wellness, spa, and fitness, which are subordinate to health tourism[22].

### III. Definition of Medical tourism

There are a few related global healthcare organization represented these industry such as The Medical Tourism Association (MTA) [25], a global non-profit association for the medical tourism and international patient industry, define the term of ‘MedicalTourism’ as “where people who live in one country travel to another country to receive medical, dental and surgical care while at the same time receiving equal to or greater care than they would have in their own country, and are traveling for medical care because of affordability, better access to care or a higher level of quality of care”. Nevertheless, World Health Organization(WHO) [26] have given the classification of ‘Medical Tourism’ through the combination of health-meaning, as a result, “healthcare related services that provide treatment and rehabilitation may be medical or “wellness” oriented, which focus on improving physical, mental and social well-being and preventing potential problems” [9].

Indeed, the very term ‘medical tourism’ is controversial Issue in the literature [17, 27]. Until now, there is no universally-agreed definition of ‘medical tourism’ competitiveness in the present literature [28]. Many classifying terms were accordingly found in the most of literature such as “health tourism”, “wellness tourism”, “medical tourism”, “health-care tourism”, “holistic tourism”, “well-being tourism”, and “spa tourism”[29], these terms have been overlapping defined in different description and context.

Inconsistent use of these terms shaveled to confusion to target specific consumer markets and future development barrier. Clarifier these area of overlap so that the policy maker and industry promotion perspective can best develop the market.

<table>
<thead>
<tr>
<th>Authors and Year</th>
<th>Health Tourism</th>
<th>Wellness Tourism</th>
<th>Medical Tourism</th>
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<tbody>
<tr>
<td>Hall, (2003) [3]</td>
<td>“a commercial phenomenon of industrial society which involves a person traveling overnight away from the normal home environment for the express benefit of maintaining or improving health”.</td>
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<tr>
<td>Borman, (2004) [30]</td>
<td>“attracting tourists with the unique attractions of the destination combined with facilities for healthcare services”.</td>
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<td>“the activity of patients who go”</td>
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<td>Baeten,(2006)[31]</td>
<td>&quot;as a state in which deliberate contribution has to be made to spiritual or emotional wellbeing in addition to physical wellbeing, through travel&quot;.</td>
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<tr>
<td>Smith and Kelly, (2006) [32]</td>
<td>&quot;foreign travel for the purpose of seeking medical treatment” [35] with or without a holiday/or the consumption of tourism services” [10].</td>
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<td>Smith and Puczko, (2009) [19]</td>
<td>&quot;health tourism is composed of medical tourism and wellness tourism, meaning that medical tourism is a subset of health tourism&quot;.</td>
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<tr>
<td>Voigt et al., (2011) [24]</td>
<td>&quot;the provision of health facilities utilizing the natural resources of the country, in particular mineral water and climate” [33].</td>
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<tr>
<td>Hall, (2011)[32]</td>
<td>&quot;the balanced state of body, spirit and mind, including such holistic aspects as self-responsibility, physical fitness/beauty care, healthy nutrition, relaxation, mental activity and environmental sensitivity as fundamental elements” [34].</td>
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<tr>
<td>Wang (2012) [29]</td>
<td>&quot;travel across international borders to seek healthcare while also taking a holiday in the foreign country&quot;.</td>
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<tr>
<td>Aydin&amp;Karamehmet, (2017) [9]</td>
<td>&quot;Traveling from place of residence to another place to acquire health-related services&quot;.</td>
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Table 2. the definitions of Medical tourism

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<th>Authors and Year</th>
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<tr>
<td>Jagyasi, (2008) [37]</td>
<td>“A set of activities in which a person travels often long distances across the border, to avail medical services with direct or indirect engagement in leisure, business or other purposes”.</td>
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<tr>
<td>Lunt, Carrera, (2013) [14]</td>
<td>“Medical tourism takes place when individuals opt to travel overseas with the primary intention of receiving medical treatments”.</td>
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<tr>
<td>Yu &amp; Ko, (2012) [7]</td>
<td>“Medical tourism, the act of travelling overseas for treatment and care, is an emerging phenomenon in the healthcare industry”.</td>
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<tr>
<td>(Connell, 2013) [17]</td>
<td>“The phenomenon of people travelling from their resident country to another country for the purpose of receiving medical treatments”.</td>
</tr>
<tr>
<td>WongKietMcKercher (2013) [18], and Lovelock &amp; Lovelock, (2018) [27]</td>
<td>“People who live in one country travel to another country to receive medical, dental and surgical care while at the same time receiving equal to or greater care than they would have in their own country, and are traveling for medical care because of affordability, better access to care or a higher level of quality of care” [25].</td>
</tr>
<tr>
<td>Pan&amp; Chen, (2014)[13]</td>
<td>“A form of outsourcing medical services to medical centers in countries in which costs of services are lower than in the home country”.</td>
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<tr>
<td>Hoet. al., (2015) [38]</td>
<td>“Medical tourism is a health service taken by customers through planned overseas travel to improve or treat various physical and psychological functions” [20, 39].</td>
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<tr>
<td>Adams et. al., (2015) [40]</td>
<td>“The movement of persons across international borders with the intention to access medical care, paid for out of pocket, and without any formal referral from their home health-care system” [41].</td>
</tr>
<tr>
<td>Abubakar, &amp;Ilkan, (2016). [42]</td>
<td>“Medical tourism (med-tour) is the act of seeking medical services in a foreign country: it is a process by which medical tourists (med-tourists) visit places for the purpose of healing and relaxation” [43].</td>
</tr>
<tr>
<td>Chamet. al., (2016) [44]</td>
<td>“A set of activities in which a person travels often long distances across the border, to avail medical services with direct or indirect engagement in leisure, business or other purposes” [37].</td>
</tr>
<tr>
<td>Luntet. al., (2016) [45]</td>
<td>“A particular form of patient mobility, where patients travel across borders or to overseas destination to receive treatments including fertility, cosmetic, dental, transplantation and elective surgery”.</td>
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<td>Fetscherin,&amp;Stephano,</td>
<td>“Medical tourism involves not only going overseas for medical treatment, but also the search for...&quot;</td>
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A number of authors expressed their view corresponding with Connell [10] suggestion that ‘health tourism’ is composed of ‘medical tourism’ and ‘wellness tourism’, and ‘medical tourism’ is the correct term to use in cases in which medical, surgical or dental operations are required, anything else is ‘wellness tourism’ [5,19]. Some researchers described that the term of ‘medical’ and ‘health’ are used interchangeably [24].

IV. What treatments categorized “Medical Tourism”? 

Some researchers classified the overlapping treatments between medical and wellness. The term “Medical tourists” are usually curative in focus [32], primarily travel to cure or treat a certain illness or medical condition. In contrast, wellness tourists go on vacation to maintain or improve their (physical and mental) health and well-being [24]. The Global Wellness Tourism Economy [49] highlighted a perspicuous distinction between medical tourism and wellness tourism adapted from Dr. Jack Travis’ Illness-Wellness Continuum, the best understood by applying the concept of the “continuum of health”.

![The Health Continuum](image)

Fig. 1. a perspicuous distinction between medical tourism and wellness tourism adapted from Dr. Jack Travis’ Illness-Wellness Continuum

The term “wellness tourism” is commonly used by authors to describe a very broad range of tourism activities and contexts. Lee & Kim [22] referred to a practical perspective by mentioning that wellness tourism mainly includes sub-sector of spa tourism [24] (e.g. massages or acupuncture and light medical procedures during a vacation) and considered to dominate the concept of wellness tourism. Wellness tourism in Cohen [50] study means “people who travel away from their normal life for the benefit of maintaining or improving their minds and bodies by utilizing the services provided by healthcare facilities at a destination”. As a result, Wellness tourism may, therefore, be seen as mainly involving relaxation exercise, massage, spa, therapy, food diet, and cosmetic surgery (for beauty) [22]. On the other hand, Jaapar et al. [46] reviewed that medical treatment could be classified:

[. . .] as preventive medical services (e.g. medical checkups and health screening), surgery (e.g. hip replacement, knee replacement, gastric bypass, heart bypass, and eye surgery), dental care (e.g. crown, tooth whitening and dental implants), cosmetic surgery (e.g. rhinoplasty, tummy tuck, liposuction), organ, cell and tissue transplants (e.g. stem cell, organ transplantation) and cardiology (e.g. bypass, valve replacement surgery)

Loicket.al. [51] divided medical treatment into vital and non-vital. The vital medical tourism concerns patients looking for cure of diseases that a life actively threatening disease (hip replacement, surgery in oncology, etc.), while non-vital medical tourism construe as the patients seeking for undergoing either well-being tourism or beauty-enhancing surgery.

V. Types of Medical Tourists

The discordance have been seeing in literature remained unclear about the concept of ‘medical tourist’. McKercher & Chan [52] specified that much of the extant research in the field of medical tourism, however, focus on measuring the size of the market without distinguishing who are the participants. It has been entangled with the conceptualization of ‘medical tourism’ to the extent which people who special interest tourism activities being a key role in their treatment decision-making process [52], while the other one is people who engage in it looking for medical help and treatment.
Most authors categorized tourists by distinguished by examining the motivations of individuals’ participating activities. The argument among the researchers have highly debated on the use of the word “tourism” to represent in which patients may not engage in any tourism activities [53]. Lunt & Carrera [54] and Yu & Ko [7] considered medical tourists as exclusively only medical services, rather than tourism services. They revealed that most people with serious diseases or illness look for overseas in order to find lower medical expenses, shorter waiting lists, and higher quality of medical care without touristic interest and additionally, ill patients have no relationship to the pleasure and destination attributes”[22]. Similar lens with Lovelock and Lovelock, (2018) also supported that motivated individuals to engaged in medical tourism is people who traveling abroad for medical services are primarily motivated by their need for medical procedure, cannot be considered a vacation [55]. Likewise, Wongkit and McKercher’s [18] have accentuated the extent to which the medical treatment activities are the curial purpose or motivation of the participated individual to seek medical help and treatment abroad.

However, the empirical evidence studied by Lovelock and Lovelock [27] revealed that the component of holiday cannot be separated from the medical component in medical tourism experience. The leisure tourism component of individuals’ medical travel was primarily based upon how long the recovery period and how seriously the medical treatment they sought, and relating factors such as reputation of the hospital or surgeon; or cost. Consistent with Chow et. al. [56] identified that travel for medical-seeking treatment or procedure is the core service being offered, while tourism activities are one of its supplementary benefits. Therefore, tourism component was relatively unimportant with decision making to medical-seeking overseas very much Broadly speaking, it seem to beg a general accepted that seeking medical treatment plays a primary vital point, wholly or partly, in the medical tourists’ decision to travel [50,57] and that international patients who have accidents or illness during a trip require medical treatment are not considered medical tourists [58-59, 18].

In summary, medical tourists are individuals whovisiting to medical destination for health reason as primary reason with or without tourism activities as the secondary reason. Cohen [50] identifies medical tourists in briefly into two broad type: those who travel explicitly for medical treatment, and those who combine a vacation with treatment. Likewise Wongkit & McKercher [18] divided into 2 type: medical tourists are “...someone who made the decision to seek treatment prior to departure, and who also identified seeking treatment as the main reason, or as equally important a reason as a holiday for pleasure, for their travel decision...”, and the holidaying medical tourist identified as “...a vacation as the main reason to travel and also preplanned to undergo treatment at their destination...”. Distinguished the type of tourists enable practitioners to know how to developmental phases of various special interest in whether tourism activities or not.

VI. The factors driving medical tourism

According to the trace of medical tourism development, the traditional medical travelraised from the lacking of the professional and technological resources in their local resident. The fact that at that moment the inconvenience and unaffordable transportation and technological communication development issue has been a barrier for international medical-seeking, as a resulted, most of medical tourists are the wealthy patients form less developed countries visiting medical centers in Europe and the U.S. in the 18th to the 20th century [5]. Due to the sky rocket of health care expenses in the upper-income nations, time consuming for doctor appointment, inaccessible health care system, and uncover insurance. The direction of the trend has later reversed as the global economic health care system change, the medical destination from developing world becoming the niche market attracting people seeking health service from developed economies [18].

In this two centuries, there are various literature examined the successful factors of medical tourism industry [10, 17, 40, 59] The third-world countries offer a world-class medical technology with a third-world costs, the renowned quality of medical and service facilities, and well-trained of expertise professional and staffs. Some medical destination provides the treatment that illegal in their home country. These factors induced outbound patients feasibility to combine treatment with travel in destination’s attractions.

Anothersignificant reason for medical tourism rapidly established in global market, by means of the by the rise of internet open up globalization of communication. The internet enable health service provider promote themselves through hospital website or let international patients comparing more information stemming from media reviewsis a different optionsto theselect final destination. On the one hand, the emergence of new agency companies or medical tourism facilitators serve as intermediaries between international patients and hospital networks. The facilitators fill the gap in the market encompass overall trip planning and coordination (assisted for hospitals selections, logistic preparations, tourism arrangement), even could persuade unwilling patients tolet healthcare facilitators handle and organize their medical oversea planning.[10, 15, 60] They mitigate the problem of foreign patients trust in medical providers and increase health provider competition, supportiveness the market expansion [61]. Includingthe development of aviation transportation technologies (the ease of international airfares and much more affordability airline choices ) where middle-income people from developed countries have more elective health carebly travel to developing countries for healthcare service[40,10].
Ormond [62] pointed out that medical tourism research and discussion is being taken up largely in the tourism realm as an expansion or diversification of the tourism service and product, primarily in countries with a high economic reliance on tourism. This might justify that the potential of regarding travel tourism information was fascinated participating in medical tourism[63,40]. Therefore, many top medical destination have advantage on an original beneficial landscape and tourism infrastructure resources. Hence, top medical destination in third world have accelerated their local healthcare and tourism infrastructure, advance medical skill (e.g. physician expertise and training healthcare provider), the quality of health care facilities & service (e.g. interpreters, shutter transportation, food, place for patients’ religious activities, private healthcare) to capture attention for supply this international market.

VII. The barriers of medical development

Medical tourism have been increasingly interested in practical and academic research in lately 20th and 21th[2]. Recently, a relatively new area of research have studied regarding the barriers for medical tourism development. Many previous researches paid attention to what factor driving medical tourism market, which countries destination draw attention on international patients. Developing nation as a medical hub requires to study and understand overall the market.

Destinationimageismajor sensitive issue significant influenceto medical tourists in decision making process. Ingram [64] work found that political instability, perceived terrorism threats or actual terrorism attacks leads to unsafety and insecurity at that destination. Tourism destination image will be negatively affected both business and leisure travel. Therefore, medical tourism country needs a stable political and government support for its strongly medical destination image. In addition, foreign patients concerns and expectations regrading an image of poverty and unhygienic conditions [65-66]. Study of issue challenging Medical tourism in India by Gopal (2008) suggested that although patients select India as world class hospitals with state of art facilities and best quality equipment, however, there are uncertainty about unhygienic standards outside hotels and hospitals (roads, sanitation, public utilitieservices)[67].

Language and communication barriers[18, 68-69], financial constraints and lack of information limit willingness to travel which Connell [17] mentioned that which elderly people, women and unskilled workers are least willing to travel, even where affordable cost savings are involved. Diasporic medical tourists who traveling to unfamiliar country are likely to handle an exacerbation of communication and incomprehension of complex procedures and dealing with health care providers [68]. International outbound patients are different from local patients in several other respects and these distinctions require hospitals to adjust the service encounter to meet the specific conditions of foreign patients[70].

Furthermore, cultural unfamiliarity and incongruence that medical tourists encounter in an unfamiliar context about local norms and practices in medical tourism country [70]. The cultural distance [71] not only be obstacle for foreign patients, but also found at local people at hostcountry. The study by Momeni et al. [69] revealed that Iran have to challenge with negative ideological and political attitudes to tourism by mean against health tourism by chiefs and elders of the area, frighten into tourists brings its different culture.

Inadequate infrastructure for tourism such as public utility services, high quality hotels, tourism police [67, 69], and as mentioned above, it’s obviously that most of top medical travel destinations basically have advantage on primality tourism infrastructure resources.

The activities of relative stakeholders that closely interactions relationship to both patients and doctors such a facilitator or medical tourism agent or broker have been found to be a challenge for foreign patient and somehow with physician also. Due to the fact that the role of medical tourism facilitators have more intensity owing to the powerful of aggregation and coordination in both demand (patients seeking care abroad) and supply (healthcare providers), as a result, they gained more power of negotiation in this market. The empirical findings of market development in Greece found that the increased leverage role in business relation of healthcare intermediaries contributed acontervailingpowerand likely to come up againstmedicalprofessionalsabout who defines the fees and terms of collaboration[61]. On the other hand, Momeni et al. [69] identified that foreign patients dissatisfied the facilitators’ opportunism (e.g. financial abuse, moral abuse, fraudulent medicine provision). These challenges issues contributed the development barriers in global medical tourism market.

However, these challenging factors mentioned above are the most prevalent problems in the literature. There are many side issues based upon its home country such as lack of supportive by government and private sector, poor coordination and management planning between the tourism sector, healthcare sector and stakeholder organizations, not transportation system and transferring of a foreign patient, and trouble in currency exchange.

For medical tourism development strategies, Ganguli and Ebrahim [28] suggested that there is no ‘one-size-fits-all’ strategy to overcome the barriers of competitiveness in the area of medical tourism development. It was prominent that the competitive medical tourism development is complex and requires the ability
tomarketing and promotion strategy planning at the international level aligned with national economic, inter-ministerial coordination, the arrangements between government and private sector, and international alliances to exploit economic opportunities[28].

VIII. Conclusion

Ability of Understanding and distinguish of what is medical tourism and who is the medical tourist in practical and academic clearly can assist practitioners planning an appropriate strategy in precisely directionandto shape researchers in a clear contradiction. This scoping review gathers the related key issues in medical tourism area in order to understanding more in this field and hope to benefit an area of future research such as the development of the strategically plan in long-term growth strategy.

Reference

[6]. Dispatchesuero. TRAVEL Bulgaria is sitting on a gold mine of spas, mineral springs and holistic health centers. Dispatchesuero; October21; 2016. Available at: https://dispatchesuero.com/weekend-starts-now-vienna-events-20-october-23-october/.
[25]. Medical Tourism Association. Medical Tourism FAQ’s, Available at: https://www.medicaltourismassociation.com/en/medicaltourism-faq-s.html
[27]. B. Lovelock, and k. Lovelock. “We had a ball … as long as you kept taking your painkillers” just how much tourism is there in medical tourism? Experiences of the patient tourist, Tourism Management, 69, 2018, 145–154.
[30]. E. Borman, Health tourism, British Medical journal, 328(7431), 2004, 60.
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[41]. R. Johnston, V.A. Crooks, and J. Snyder. ‘I didn’t even know what I was looking for’: a qualitative study of the decision-making process of Canadian medical tourists, Globalization and Health, 8 (23), 2012.

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