



## NICHE MARKETS IN MEDICAL TOURISM

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### Abstract

Medical tourism is a growing industry that appeared as a niche market around the globe. From a strategic point of view, niche markets result in environments that have high profits and are accessible to a smaller number of businesses. This study is primarily concerned with the various services offered within the scope of medical tourism and statistics regarding the global prevalence of such services. Thus, any services that are widely available with cost being the main driving factor for a patient to receive the service abroad are excluded. Surgical procedures that are deemed illegal in some jurisdictions, countries where confidentiality is valued, countries that can deal with complicated medical cases, and niche markets aimed at medical tourism in these countries are examined in this study with the goal of providing the businesses offering services related to medical tourism with a strategic point of view.

**Keywords:** Medical Tourism, Niche, Market, Marketing, Health Tourism

## Introduction

Although the medical tourism industry has existed for a long time, it has expanded significantly following the late 90s. As a subcategory of health tourism, medical tourism implies going abroad to access certain medical services as well as vacationing in the countries visited (Akbolat and Gülcin Deniz, 2017; Kim, et.al, 2019; Sayin, et.al, 2017).

Emerging as a niche market, medical tourism has advanced rapidly worldwide. Niche marketing is a segmentation of bottom-up marketing. Thus, it involves the fragmentation of the mass market (Güclütürk Baran and Ozogul, 2018). Medical tourism also represents a segment of health tourism and certain countries around the world are preeminent when it comes to different service areas of this market. Although there are numerous studies concerned with the practical applications of niche marketing, there are no widely accepted studies in the literature aiming to create a theoretical framework for niche marketing (Parrish, et.al, 2006; Toften and Hammervoll, 2013). In the existing literature, niche marketing is considered as a strategic variable from a strategic point of view (Choudhary, 2014; Dalgic and Leeuw, 1994; Stachowski, 2012) as well as market segmentation in a narrower framework (Ciftci and Ogretmenoglu, 2018; Güres and Akgül, 2014; Sert, 2017). In this study, the strategic point of view was taken into account while evaluating medical tourism as a niche market.

There are various problems regarding access to health services around the world. These problems have contributed significantly to the development of medical tourism. Some of the problems that contribute to the development of medical tourism include the medical practice being considered illegal in some jurisdictions, said operation posing a problem in terms of religious beliefs, social reasons, lack of technology to provide access to the requested service, the complexity of certain health problems requiring specific treatment (Altsoy and Tastan Boz, 2019). Areas of special interest have a tendency to attract demand (Güclütürk Baran and Ozogul, 2018) and these problems prevent access to much needed health care in many countries around the world. In countries that are capable of providing these services, a niche market where the needs of a special consumer group are met is created. Medical tourists can more easily access the treatments they need in distant countries where such problems do not exist (Sayin, et.al, 2017). This study aims to reveal the niche market areas in medical tourism by drawing attention to medical tourism

areas with these features. In addition, medical tourism is a commercial activity as well as a touristic activity carried out for the purpose of receiving health services (Ari, 2017). Therefore, ensuring profitability is essential. While the service areas with great patient potential and problems in accessing said services are included in the study, the services that are provided almost universally whose costs fluctuate between countries and are lower compared to other services (such as high-anesthetic aesthetics, hair transplantation, dental treatments etc.) are not included. The study is remarkable in terms of dividing medical tourism, which is considered a niche market, into niche markets within itself.

## 2. Medical Tourism

Medical tourism is defined as the act of traveling for the purpose of receiving medical care (Al-Shamsi, et.al, 2018; Kumar and Raj, 2015; Young, et.al, 2019; Zarei and Maleki, 2018) and there are two categories of medical tourists. The first category consists of those who travel from developed countries to less developed countries in order to receive treatment for health problems that incur high costs or are not included in the health services offered in their country of residence. The second category, on the other hand, consists of people who travel from less developed countries to more developed countries in order to access more advanced healthcare services that are not available in their home countries (Cannon Hunter, 2007; Fetscherin and Stephano, 2016; Hudson ve Li 2012). International patients among these tourists that come from developed or wealthy nations constitute an important financial opportunity for developing countries and institutions located in these countries (Benedetti, et.al, 2018). On the other hand, international medical traffic from underdeveloped countries to developed countries is due to the desire of these patients to receive advanced medical care that may not be available in their own countries (Young, et.al, 2019).

*Josef Woodman, founder, and CEO of Patients Beyond Borders, a US-based company that provides consultancy services to medical tourists, makes a similar statement on the subject. Woodman states that citizens of the USA, Canada, the United Kingdom, and many European Union member countries, where health services are provided to a higher standard but access to these services incur higher costs, are looking for more affordable options. On the other hand, they state that the citizens of countries whose economies are developing such as China and Vietnam, create a wave of medical movement affecting countries where*

*they can access the best care, regardless of price. According to Woodman, international hospitals and clinics compete aggressively for global patients (Woodman, 2020).*

Medical tourism is a growing industry thanks to developing health technology, decreasing transportation costs and innovative information technologies (Cesario, 2018; Fetscherin and Stephano, 2016; Heung, et.al, 2011; Xu, et.al, 2020). Some of the factors contributing to the growth of the industry are increasing health care costs in developed countries, long waiting times, lack of insurance coverage for some services, low wages in developing countries, aggressive marketing strategies, competitive health markets, low cost, fast transportation opportunities, the operation being considered illegal in the country, lack of confidence in the quality of the treatment provided, access to technology, expertise and generally better health services in foreign countries, the desire to get faster medical services from high-brand hospitals with better quality doctors and better equipment (Alsharif, et.al, 2010; Carabello, 2013; Dehdashti Shahrokh and Nakhaei, 2016; Foley, et.al, 2019; Glinos, et.al, 2010; Jang, 2017; Zarei, et.al, 2018).

The results obtained from several studies which describe the factors affecting the preferences of medical tourists are presented in the table below. Studies show that numerous factors affect what countries a medical tourist is likely to choose. It is understood that low costs, quality service, fast access, and service delivery to an international standard are the most important factors among the ones studied.

**Table 1. Main Motivators in Medical Tourism**

Author	Research Knowledge	Lower Price	Standby Time	Trained Staff	Legality	Spoken Language and Culture	Security	Insurance Coverage	No Service	Privacy	Travel	Being Accredited	Proximity to Country of Residence	Quality Service
Reddy, et.al. - 2010	Travel for treatment: students' perspective on medical tourism.	√	√	√				√	√		√			
Heung, et.al. - 2010	A Conceptual Model of Medical Tourism: Implications for Future Research.	√	√	√		√				√	√	√		√
Lunt and Carrera - 2010	Medical tourism: Assessing the evidence on treatment abroad.	√	√	√	√	√		√	√	√	√	√	√	√
Hopkins, et.al. - 2010	Medical tourism today: what is the state of existing knowledge?.	√	√		√			√	√			√		√
NaRanong and NaRanong 2011	The effects of medical tourism: Thailand's experience.	√										√		√
Peters and Sauer - 2011	A survey of medical tourism service providers.	√	√			√		√	√	√	√	√	√	√
Heung, et.al. - 2011	Medical tourism development in Hong Kong: An assessment of the barriers.	√		√		√	√					√	√	√
Wang - 2012	Value as a medical tourism driver.	√	√				√				√	√		√
Hudson and Li - 2012	Domestic Medical Tourism: A Neglected Dimension of Medical Tourism Research.	√	√					√	√	√	√			√
Musa, et.al. - 2012	Travel behaviour among inbound medical tourists in Kuala Lumpur	√	√	√	√	√		√	√	√	√	√		√
Lee, et.al. - 2012	Medical Tourism-Attracting Japanese Tourists For Medical Tourism Experience.	√									√			√
Runnels and Carrera - 2012	Why do patients engage in medical tourism?	√	√					√			√	√		√
Connell - 2013	Contemporary medical tourism: Conceptualisation, culture and commodification.	√	√		√	√		√	√			√	√	√
Fetscherin and Stephano - 2016	The medical tourism index: Scale development and validation.	√		√		√	√				√	√		√
Esiyok, et.al. - 2017	The effect of cultural distance on medical tourism.	√	√			√		√				√	√	√
Suess, et.al. - 2018	Perceived impacts of medical tourism development on community wellbeing.	√	√					√						
Cesario - 2018	Implications of Medical Tourism.	√	√		√			√	√		√			√
De la Hoz-Correa, et.al. - 2018	Past themes and future trends in medical tourism research: A co-word analysis.	√	√									√		√
Bagga, et.al. - 2020	Medical tourism: Treatment, therapy & tourism.	√	√	√		√	√		√	√	√	√	√	√

Apart from the factors mentioned in the table, it can be said that hospitality, regulatory policies of the country, political and economic situation, advice from other medical tourists and advertisements (Fetscherin and Stephano, 2016; Heung, et.al, 2011; Heung, et.al, 2010; Hudson and Li, 2012) ease of visa procedures (Bagga, et.al, 2020) presence of acquaintances in the destination country, service in accordance with the religious requirements of medical tourists (for example, providing halal food for Muslim patients), historical ties between the home and destination countries (Esiyok, et.al, 2017; Lunt and Carrera, 2010) and the continuity of the health service provided upon returning to their own country (De la Hoz-Correa, et.al, 2018; Lunt and Carrera, 2010) are also effective in choosing a country.

*Jai Verma, the Senior Chief Executive Officer of a company that provides healthcare services on a global scale, cites, the rising healthcare costs in western countries, and the fact that some services are not covered by insurance as the reason behind the rapid increase in medical tourism. According to Verma, people are willing to travel to other countries for medical, cosmetic and surgical services that are not available or are unaffordable in the countries they live in. Healthcare costs are increasing around the world, and governments understand the importance of investing in healthcare to attract patients. They also cite the agreements health insurance companies have with quality and affordable medical centers as well as the geographical locations of the countries as effective factors in attracting medical tourists (Verma, 2020).*

*Gianrico Farrugia, the CEO of a US based hospital that provides services internationally, draws attention to the continuity of the service saying “We expect medical tourism to continue to grow. At the same time, we anticipate that patients will increasingly want and expect to receive care close to their home, or even in their own homes, thanks to advances in digital technology.” (Farrugia, 2020).*

*Prahlad Singh Patel, India's Minister of State (Independent Charge) of Culture and Tourism, emphasizes the quality of health services as a factor increasing dynamism in medical tourism. Patel states that there currently are 34 Joint Commission International (JCI) accredited hospitals in India. According to Patel, the number of JCI-accredited hospitals in the country needs to be increased in order to attract more medical tourists and offer them more hospital options (Patel, 2021).*

If we look at the reasons for international travel in the world, leisure travel takes the first place. This is followed by mobility for health purposes (Ferreira and Castro, 2020). However, the growth momentum of the health tourism market is higher than that of recreational tourism (Lautier, 2014).

The medical tourism sector is seen as a promising sector and is considered the highest value-added service sector in the Fourth Industrial Revolution. In this context, many governments around the world are willing to boost and develop the medical tourism industry (Seo and Park, 2018). Due to the increase in the number of countries providing medical tourism, it is possible to achieve high profitability by differentiating service provision or by focusing on niche areas (Fetscherin and Stephano, 2016).

*CEO of the Health Regulation Sector at Dubai Health Authority (DHA), Dr. Marwan Al Mulla also draws attention to the quality of care and the services provided by the medical tourism centers in Dubai to improve the service conditions of medical tourists. Mulla states that 96 percent of hospitals in the emirate of Dubai are internationally accredited, employ highly skilled doctors and healthcare professionals, and provide world-class personalized healthcare. They also mention that the medical tourism industry in Dubai offers patients a variety of options for high-quality health services in their core areas of expertise, and guidance is provided to make the journeys of medical tourists smooth and comfortable (Dubai Health Authority, 2020).*

Medical tourism as a growing industry offers many entrepreneurial opportunities. In Asian countries, where these opportunities were adopted at an early stage, competitive advantage has been gained thanks to the support and encouragement of governments. Medical and healthcare businesses in countries such as India, Thailand, Singapore, and Malaysia are constantly investing to attract tourists, placing particular emphasis on their positions as healthcare and wellness destinations. While the costs of medical treatment and waiting times for access to health care are increasing in Western countries, the demand for medical services in developing countries is expected to increase even more. As a result, Asian countries specializing in attracting medical tourists are creating new entrepreneurial activities in the region that can lead to a profitable and sustainable tourism industry (Carabello, 2013).

Looking at the statistics of the Medical Tourism Association for the 2020-2021 period, Canada is the country where health tourism occurs the most in the world. Singapore, Japan, Spain, United Kingdom, Dubai, Costa Rico, Israel, Abu Dhabi, and India follow up Canada in this respect (Medical Tourism Association, 2020). It is estimated that the annual number of medical tourists worldwide is 5.5 million, whereas the total value of medical travel expenditures is estimated to be US\$ 10-15 billion (Rokni and Park, 2019). Considering the size of the income from medical

tourism, it is not surprising that some cities and countries (such as Dubai, Singapore, and Malaysia) are actively resorting to medical tourism (Dalen and Alpert, 2018).

A medical service is received within the scope of medical tourism (Young, et.al, 2019). However, the consumption areas in the care of international patients are not only related to medical care. Medical tourism also requires allocation of resources for different consumption areas. Therefore, it is said that medical tourism tends to be resource intensive. In medical tourism interpreters or cultural guides are needed more often compared to local patients. Treatment planning may take longer and require the use of auxiliary services such as physiotherapy (Benedetti, et.al, 2018). In addition, when people travel for medical reasons, they need accommodation and other related tourism services not only for themselves, but also for the family members who often accompany them (Carabello, 2013; Ferreira and Castro, 2020). This situation supports the view that medical tourism is an important market for the country where service is received and the necessity of making investments.

*Annabelle Neame, the CEO of a UK based hospital, also draws attention to this situation. According to Neame, another important issue in medical tourism is the provision of family-centered holistic care to the families and loved ones accompanying patients. The treatment process can be stressful and in order to facilitate the treatment process of the patient as much as possible, it is necessary to consider the demands of the patients in service areas such as health concierge services, accommodation, rental and travel arrangements, interpreters, drivers, travel guides, hotel and restaurant reservations etc. No request is ever too small. In all matters, daily assistance should be provided to patients and their relatives (Neame, 2020).*

### **3. Medical Tourism as a Niche Market**

Medical tourism is a subset of health tourism and a new (Junio, et.al, 2016), rapidly developing global niche market where tourists often travel to foreign destinations for medical treatment and services (Ari, 2017; Buzcu and Birdir, 2019; Ile and Tıgu, 2017; Zarei and Maleki, 2018). There is evidence that it has significant socio-economic impacts and strengthens as well as enhances the medical and tourism industries in various destinations. Medical tourism is considered an important niche for any destination that is potentially competitive in terms of price and services. It results in increased spending in cases where a longer stay is required (Cannon Hunter, 2007).



Medical trips can be carried out for minor cosmetic procedures (hair transplantation, botox, etc.), dental health (dentures, implants, etc.) and diagnostic tests where health risks are relatively low (Eltorai and Garimella, 2017). Apart from these, frequent medical trips abroad also include important interventions such as orthopedic surgeries (hip replacement, prone, knee replacement, joint surgery), bariatric surgeries (gastric bypass, gastric banding), heart care/surgeries, cancer treatments, organ transplantations, vascular surgeries, and fertility treatments (Bolton and Skountridaki, 2016; Cheng, 2015; Glinos, et.al, 2010; Hwang, et.al, 2018; Lunt, et.al, 2016; Young, et.al, 2019). Some countries fund patient mobility programs to direct services to a different country that provides more affordable and quality healthcare for rare or complex situations, rather than providing services domestically. In countries that do not have a well-functioning health system, people can go abroad even for basic health services (Glinos, et.al, 2010).

The countries that stand out in terms of the fields they serve in medical tourism are as follows: India cardiology, orthopedics, organ transplants; Singapore, cardiology, kidney and bone marrow transplant and plastic surgery; Malaysia obesity surgery; South Korea oncological surgery; Costa Rico dental health and some aesthetic applications; Thailand is at the forefront of gender reassignment, while Turkey is more prominent in areas such as hair transplantation, aesthetic surgery, eye, dental, orthopedics, oncology, and in vitro fertilization (Sayin, et.al, 2017; Tengilimoglu, 2020).

*Sangita Reddy, the CEO of one of the major medical tourism centers in India, told the Press Trust of India that many of her international patients seek medical treatments for oncology, organ transplants, cardiac interventions, orthopedic problems, and neurosurgery. According to Reddy, cost-effectiveness, focus on advanced medical technology and availability of skilled medical professionals are some of the features that have helped India attract international patients. Indian doctors provide international standard care at a rate well below the international cost. However, Reddy states that India can take the upper hand in medical tourism through marketing campaigns (Reddy, 2020).*

### **3.1. Niche Market Areas in Medical Tourism**

#### **3.1.1. Surgical tourism**

There is an increase in the number of patients traveling to different countries to receive surgical care around the world. Due to the cost of surgical care, patients often travel to receive care that

they consider affordable and high quality (Eltorai and Garimella, 2017). According to The Lancet Commission on Global Surgery report, there is a significant increase in diseases requiring surgical intervention. Despite this, there are various problems in accessing safe surgical intervention (World Health Organization, 2015).

In the last few decades, the increase in non-communicable diseases such as diabetes, hypertension and ischemic heart disease brought together a surge in the rate of surgical intervention caused by these diseases, as these diseases sometimes require surgical intervention. Surgical operations such as advanced cancer surgery, organ transplantation and functional neurosurgery are now promising for these diseases, which until recently had an extremely poor prognosis. However, the complexity and high cost of most of these surgeries contribute to the fact that they form an important market for medical tourism, since they are not covered by insurance in some countries (Nagral, et.al, 2017).

Along with the increase in medical tourism, there is also an increase in medical tours related to orthopedic procedures in general (Eltorai and Garimella, 2017). Orthopedic procedures most commonly engaged in through medical tourism include knee arthroplasty, hip arthroplasty, joint arthroscopy, spinal laminectomy, spinal decompression, and spinal disc replacement. Complications that may occur after bariatric surgery can constitute an obstacle for operations to be performed in distant countries (Foley, et.al, 2019; Kowalewski, et.al, 2019). Cosmetic surgery, on the other hand, is widespread worldwide, and destinations where related services are offered are increasing. Instead of all the different kinds of cosmetic surgery, it may be more meaningful to turn to cosmetic applications that cannot be performed in different countries for various reasons. For example, face transplants require surgical treatment to correct deformities on the face of the individual and to improve functional or aesthetic results. Face transplant surgery, which became legal in 2004, is a new field worldwide (Ugras and Yüksel, 2014). The fact that the results of face transplantation are in the desired direction increases the interest of both patients and providers. However, the number of centers where these practices will be carried out is insufficient (Rifkin, et.al, 2018). Considering these situations, turning to more complicated cases in the medical tourism market regarding surgical interventions may create a niche market for service providers.

### 3.1.2. Transplant tourism

It is estimated that approximately 10% of organ transplants in the world are carried out through transplant tourism (Morris and Muller, 2019). Transplant tourism is the act of donors, recipients, or transplant specialists traveling or the organs being transferred for the purpose of transplantation in accordance with law (Rudge, et.al, 2012).

Organ transplant tourism involves any organ (eg. Kidney) being transferred from highly developed countries with long waiting lists to less developed countries where there are no prohibitive regulations on buying and selling organs (Broumand and Saidi, 2017; Hopkins, et.al, 2010). Organ transplantation is the best and sometimes the only treatment for many patients with end-stage organ failure (Rudge, et.al, 2012). The demand for organ transplantation all over the world is increasing much faster than the donation rate (Broumand and Saidi, 2017; White, et.al, 2014). According to the Global Observatory on Donation and Transplantation reports (2019), looking at the countries that stand based on organ types transplanted, Spain ranks first in kidney transplantation, Korea in first lung transplantation, the US in heart transplantation, Austria in lung transplantation, Finland in pancreas transplantation and England in intestinal transplantation (Global observatory on donation and transplantation, 2019). Although there is a demand for organ transplantation in some countries, it is seen that the demand cannot be met for various reasons. Among these reasons are legal problems, religious beliefs, lack of trained personnel, costly transplantation practices and insurance packages not covering transplantation costs in some countries (White, et.al, 2014). This is an important factor that causes people in need of transplantation to go to different countries and meet their needs. For this reason, it is an important niche market in the case of providing accessible quality service in this field.

Stem cell transplantation is another field of medical tourism along with organ transplantation. Although the health problems in which stem cell transplantation is applied are very diverse, it is often a treatment method used in incurable neurological diseases such as multiple sclerosis (MS), amyotrophic lateral sclerosis (ALS) or spinal cord injury. Since it is not possible to treat these diseases, stem cell transplantation is seen as a beacon of hope. Desperate patients suffering from these diseases tend to seek radical treatments at all costs to regain their function. On the other hand, the therapeutic potential of stem cell research and future individualized treatment applications is seen as a turning point (Julian, et.al, 2018). The presented stem cell

procedures cost thousands of dollars (Julian, et.al, 2020) and are not covered by insurance (Julian, et.al, 2018). However, cost tends to be seen as an insignificant factor for people who want to receive the service. The fact that the patient profile requesting this service is indifferent in terms of cost and that this service is not accessible in every country can be seen as a driving force for countries to focus on providing services in this field. The leading countries in the market are the US, India, China, Mexico, and Thailand (Foley, et.al, 2019).

### **3.1.3. Fertility treatments, abortion, and sex-reassignment**

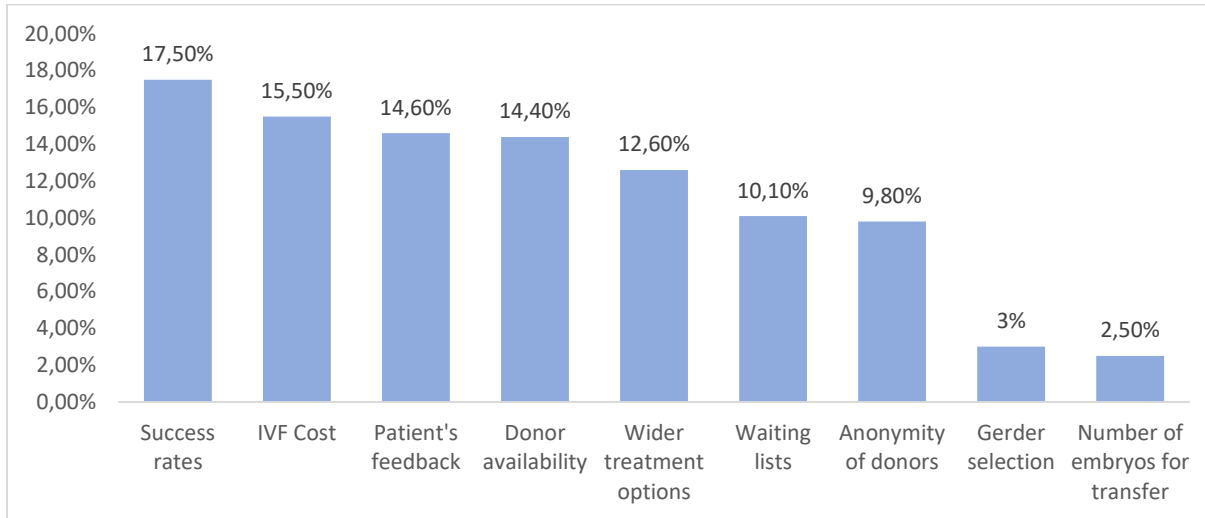
In many countries, egg donation, surrogacy, and even in vitro fertilization are prohibited by law. For example, surrogacy is illegal in Sweden, Norway, Austria, France, Germany, and various US states (Mikava and Vasadze, 2020). In this context, reproductive treatment has a number of motivations for cross-border travel, including legal restrictions on access to certain forms of treatment (e.g. surrogacy, restriction of access to treatment for certain categories of people (singles or same-sex couples), high treatment costs in the country of residence, desire for donor anonymity, choice of gender or trait, desire for treatments considered too experimental to be available in the country of residence, lack of specialists in the country of residence, lack of gamete (especially oocyte) donors, long waiting times, desire for culturally sensitive care, higher success rates abroad or higher quality of care) (Culley, 2011; Lunt, et.al, 2016; Mikava and Vasadze, 2020).

*The demand for cross-border reproductive services is one of the growing niche markets within medical tourism, according to Keith Pollard, the Editor-in-Chief of the International Medical Travel Journal (IMTJ). It is estimated that approximately five million babies have been born through in vitro fertilization and other related reproductive techniques in the last 40 years (Pollard, 2015).*

*The International Fertility Company is an online platform with headquarters in the UK and the US providing information to anyone considering traveling for fertility treatments. A survey was conducted by the company in May 2020 to determine the factors affecting the fertility treatment choices of patients of different ages. In a 2017 report, cost remains the most important criterion for the majority of respondents (around 70%), while in the 2020 report, cost remains an important factor only for young respondents. On the other hand, for older participants, the availability of donors, wider treatment options, success rates, and feedback from previous travelers were found to be more important factors than cost. The company stated that clinics that want to promote international patients should develop different marketing strategies*

for different age groups. In line with the opinions of 527 people, the factors affecting the choice of destination for fertility treatments are shown in the chart below (Fertility Clinics Abroad, 2020).

**Graphic 1. Factors Affecting the Choice of Destination for Fertility Treatments**



According to Julie Munro, the president of the Medical Travel Quality Alliance (an international independent organization established in 2009 to promote safety and quality in treatment and care for medical tourists), quality and access to services in accordance with international standards are the most important criteria for medical tourists in choosing a country and hospital. Although affordability also remains an important factor (Munro, 2019).

Surrogacy is another technique among reproductive techniques. The cost of surrogacy in India today is approximately \$40,000. Surrogacy can be considered as an important niche market in that it is not legal in every country and is a service provided for a serious fee. On the other hand, it is seen that fertilization fees (egg donation only) reach approximately \$11,000 (Health Tourism). However, reproductive therapy requires long-term treatment and care, including prenatal and postnatal processes. This makes fertilization services an important market in medical tourism.

Another area of reproductive medical tourism is abortion. In Europe, abortion is legal in most jurisdictions, but restrictions, gestational age limits, waiting times and procedures, cultural and religious stigma, and social pressures affect access to abortion care. In some European countries with ostensibly liberal abortion laws, such as Italy and France, women face legal barriers to termination of pregnancy after the first trimester, before which abortion is permitted, particularly in case of fetal anomaly or risk to a woman's health or life. Limited or insufficient clinical training

and conscientious objection among physicians lead to a lack of willing or trained service providers in many countries, particularly for second trimester abortions. Both legal restrictions and conscientious objection negatively affect the quality of abortion provision and create barriers to abortion services in many countries. In addition to legal restrictions and conscientious objection, cost of services, coverage, and reimbursement (or lack thereof) by the public health system, waiting times, complex referral or approval practices, limited facilities, uncooperative or untrained medical staff, anti-choice harassment, and lack of confidential services are reasons for women to select another country for an abortion. In countries where access to abortion is restricted, many women travel within or outside their home country to circumvent local laws and illegal barriers to abortion services (Gerds, et.al, 2016).

#### 3.1.4. Cancer

Cancer patients living in developing countries desire access to specialized care services such as sophisticated surgery or the latest advances in chemotherapy offered in developed countries (Awano, et.al, 2019). In some cases, they may want to get health services from a more developed country in order to get a second opinion on their own situation from service providers who are certified in the medical and surgical fields and have clinical and research experience (Al-Shamsi, et.al, 2018). Currently, the most used medical tourism field in the classification made according to treatment types is cancer treatment. In the coming years, the demand for medical tourism for cancer treatment is expected to increase more than for other types of treatment. Cancer treatment is an expensive and long-term treatment. For this reason, the demand for destination regions that provide lower-cost services is increasing and this situation affects the growth of the market. Apart from this situation, due to the lack of advanced treatment in some countries, patients turn to countries that provide advanced health services in order to receive a higher-quality service. This is the main element that highlights this treatment field (Allied Market Research).

*Dr. Hamed Al Hashemi, Abu Dhabi Ministry of Health Strategy Director, and Dr Mohammed Al Khatib, Medical Director of the HealthPlus Diabetes and Endocrinology Center, emphasized on ensuring the continuity of cancer treatments offered to medical tourists. The duo stated that cancer is a complex disease and a patient's treatment process requires a series of tests and care performed in many different facilities, therefore the continuity and integrity of care is extremely important and has a direct impact on the success of the treatment (Al Hashemi and Al Khatib, 2021).*

In the report published by the World Health Organization on non-communicable diseases, cancers form the second most common type of non-communicable diseases (World Health Organization, 2018), and according to the International Cancer Research Center Reports, breast cancer is the most common form of cancer per 100,000 of the population. The number of breast cancer cases is followed by prostate, lung, bowel, cervical and stomach cancer cases. In medical tourism planning, the most common cancer areas can be prioritized. In addition, considering the number of cases (19.292.789 cases) and deaths (9.958.133 deaths) around the world, it is clear that there are still areas that need to be improved in cancer treatment and that countries that will achieve effective treatment in this context will gain a serious niche market (International Agency for Research on Cancer) Among the cancer types, lung and stomach cancers are the most lethal cancers in both sexes, whereas liver cancer is the most lethal in men and breast cancer is the most lethal in women (Mattiuzzi and Lippi, 2019). On the other hand, while cancer cases, like facial cancers, are among the cancers with high mortality rates, it is a health problem that faces problems in its treatment worldwide (Esen, et.al, 2018; West, et.al, 2006). In this context, it is thought that turning to the treatment of complicated cases that other countries cannot perform in the field of health tourism in cancer cases or the treatment of cases that other countries do not wish to focus on will allow to obtain a niche market area and create an important source of income. Anadolu Medical Center, which ranks second in the list of the best medical tourism centers in the world, is renowned in cancer treatment (World's Best Hospitals for Medical Tourists).

#### **4. Conclusion and Recommendations**

Medical tourism is a rapidly growing new type of tourism and an international and political-economic phenomenon in the world, especially in Asian countries (Thailand, Singapore and India) (Tarabipour, et.al, 2016). The main targets of medical tourism are patients who have the potential to visit other regions or countries to meet their medical needs (Hwang, et.al, 2018).

The motivations these patients must travel to different countries in order to receive healthcare are different from each other. These motivations include being able to receive health care services at a lower cost (patients living in the US), waiting for a shorter time (patients in Canada and the UK), receiving health services that are deemed illegal in their home countries in countries where there are no legal obstacles, to avoid the technologically inadequate services provided in their own countries. There are also other factors such as the desire to receive a higher

quality service from a doctor who is considered more qualified. Some also apply for medical services such as elective surgery, including aesthetic surgery, in places they go on vacation (Tarabipour, et.al, 2016).

Among these motivations, cost and quality of care are important factors for medical travel, but they are not the only ones. Timely access to services, regardless of cost, appears to be the key driver of cross-border care (Alsharif, et.al, 2010). The main issues regarding access are long waiting times, the service to be received being considered illegal in the country of residence, and a lack of sufficient opportunities for providing the service even if it is legal. Regions with legal problems can be considered as regions with deficits, especially in terms of medical tourism. Some inconveniences are extremely lethal, and it is understood that there are problems with access to these services in many parts of the world. The fact that these diseases require advanced expertise and that many physicians and health institutions do not offer these services are also areas where there are gaps in medical tourism. It can also be said that the competition in these areas is weak (Karamustafa and Akin, 2017). It can be argued that the inadequacy of the number of centers providing services and the absence of centers to compete make these areas more profitable than other types of services. This study aims to offer market information and emphasize the strategic importance of the areas that are undervalued due to various reasons around the world and where access is problematic.

The driving force of medical tourism in countries its higher profitability and income provision compared to the other medical services offered. In this context, it is recommended that countries focus on services of this nature within the scope of medical tourism. On the other hand, there are uncertainties in the number of people receiving services related to medical tourism (Kowalewski, et.al, 2019). With more precise numbers of medical tourists available, it is thought that it will provide more reliable information in determining which countries are preferred for which types of services and market gaps. In addition, it is assumed that it will guide the medical service providers in terms of which areas they should operate.

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