

# Investigation of factors influencing patients' preferences for traveling to Türkiye for dental tourism: The case of a private hospital

Dental turizm amacıyla Türkiye'ye seyahat eden hastaların tercihlerini etkileyen faktörlerin incelenmesi: Özel bir hastane örneği

## Abstract

**Aim:** This study aimed to investigate why dental tourists choose Türkiye for their dental clinic visits, specifically looking at a private hospital in Istanbul.

**Methods:** This cross-sectional study employed a face-to-face survey method conducted through an interpreter with foreign patients who applied to the dental clinic of a private hospital in Istanbul (n = 52) between March 24, 2023, and February 29, 2024. The questionnaire comprised 29 inquiries aimed at collecting the participants' demographic characteristics, elucidating their motivations for selecting Türkiye as a destination for dental care, and describing their experiences throughout the treatment process. The inquiries were presented in single-choice and multiple-choice formats.

**Results:** Approximately 94% of dental tourists chose Türkiye for its price advantage, 86% for shorter treatment times, 82% for trust in the dentist, 78% for easy appointment scheduling, 60% for advanced technology, and 52% for low travel costs. African patients cited high costs, poor technology, appointment challenges, inadequate education, and hygiene issues as reasons for not seeking treatment in their home countries. Furthermore, European visitors cited high prices and difficulty obtaining appointments as their primary concerns, while all Middle Eastern respondents reported that obtaining an appointment was difficult. Although 77.4% of dental tourists accessed this hospital through an agency, 53.8% communicated with previous visitors to Türkiye, and 84.6% conducted research via social media.

**Conclusions:** Within its limitations, the study concluded that affordable treatment costs, confidence in the experience of dental professionals, short treatment durations, and overall accessibility were the primary factors influencing patients' decision to choose Türkiye for dental tourism. The reasons African patients did not seek dental care in their home country included inadequate training of dentists, unavailability of specific treatments, and poor hygiene. Travel agencies, word of mouth, and social media influenced dental tourists' decision-making processes.

**Keywords:** Dental health services; dentists; medical tourism

## Öz

**Amaç:** Çalışmanın amacı İstanbul'daki özel bir hastanenin diş kliniğine başvuran dental turistlerin Türkiye'yi tercih nedenlerinin araştırılmasıdır.

**Yöntemler:** Çalışma kesitsel bir araştırma olup, 24 Mart 2023 ile 29 Şubat 2024 tarihleri arasında İstanbul'daki özel bir hastanenin diş kliniğine başvuran yabancı hastalarla (n=52) tercüman aracılığıyla, yüz yüze anket yöntemiyle yapılmıştır. Anket, katılımcıların demografik bilgilerini toplamayı, diş tedavisi için Türkiye'yi seçme motivasyonlarını anlamayı ve tedavi süreci boyunca yaşadıkları deneyimleri tanımlamayı amaçlayan 29 sorudan oluşmaktadır. Sorular tekli ve çoklu cevaplı formatlarda sorulmuştur.

**Bulgular:** Dental turistlerin %94'ü Türkiye'yi fiyat avantajı, %86'sı kısa tedavi süreleri, %82'si diş hekimlerine duydukları güven, %78'i kolay randevu planlama, %60'ı ileri teknoloji imkanları ve %52'si düşük seyahat maliyetleri nedeniyle tercih etmiştir. Afrikalı hastalar, kendi ülkelerinde tedavi görmemelerinin nedenleri olarak yüksek maliyetler, teknolojik imkansızlıklar, randevu almanın zorluğu, diş hekimlerinin yetersiz eğitimi ve hijyen sorunlarını göstermişlerdir. Avrupalı ziyaretçiler ise birincil olarak ülkelerindeki yüksek fiyatlar ve randevu alma zorluğunu belirtmişlerdir. Orta Doğu'dan gelen hastaların tamamı randevu almanın zorluklarından bahsetmiştir (p < 0,05). Dental turistlerin %77,4'ü bu hastaneye bir acente aracılığıyla ulaşmış olsa da, %53,8'i daha önce Türkiye'yi ziyaret etmiş kişilerle iletişim kurmuş, %84,6'sı da sosyal medyada araştırma yapmıştır.

**Sonuçlar:** Çalışmanın sınırlılıkları dâhilinde, hastaların dental turizm için Türkiye'yi seçme kararlarını etkileyen temel faktörler uygun tedavi maliyetleri, diş hekimlerinin deneyimine duyulan güven, kısa tedavi süreleri ve tedaviye erişim kolaylığıdır. Afrikalı hastaların tedavilerini kendi ülkelerinde olmama nedenleri arasında diş hekimlerinin yetersiz eğitimi, kendi ülkelerinde belirli tedavilerin yapılamaması ve yetersiz hijyen koşulları yer almaktadır. Seyahat acenteleri, kulaktan kulağa yayılan bilgiler ve sosyal medya dental turistlerinin karar verme süreçlerini etkilemektedir.

**Anahtar Sözcükler:** Dental sağlık servisleri; diş hekimleri; tıbbi turizm

**Zeynep Hale Keleş<sup>1</sup>,  
Mustafa Orkun Ertugrul<sup>1</sup>,  
Jale Tuncer<sup>3</sup>**

<sup>1</sup> Department of Restorative Dentistry, Faculty of Dentistry, Atlas University

<sup>2</sup> Department of Restorative Dentistry, Faculty of Dentistry, İstinye University

<sup>3</sup> Department of Restorative Dentistry, Faculty of Dentistry, Galata University

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**Corresponding author/Yazışma yazarı**

**Zeynep Hale Keleş**

İstanbul Atlas Üniversitesi, Diş Hekimliği Fakültesi, Restoratif Diş Tedavisi Anabilim Dalı, İstanbul, Türkiye  
E-mail: halekeles@hotmail.com

## ORCID

Zeynep Hale Keleş: 0000-0003-3793-4512  
Mustafa O. Ertugrul: 0000-0001-5138-900X  
Jale Tuncer: 0009-0004-4855-9409

## INTRODUCTION

A health tourist is defined as an individual who crosses international borders to receive medical treatment (1). Annually, millions of health tourists travel abroad for medical care (2). The medical tourism industry is projected to reach USD 47 billion by 2024, with anticipated growth to surpass USD (United States Dollar) 111 billion by 2029 (3). Among the key drivers of health tourism are increased income levels, enhanced transportation facilities, an aging demographic, and the proliferation of e-commerce (4). The most sought-after procedures among medical tourists encompass elective cosmetic surgery, dental treatments, organ transplants, cardiac operations, and orthopedic procedures. Notable destinations in the medical tourism sector include India, Malaysia, Türkiye, Singapore, and Thailand (1). Historically, medical services have been frequently inadequate, leading to health tourism, where patients from developing nations seek treatment in developed nations. However, contemporary trends indicate a reversal, with individuals from developed countries traveling to less developed countries due to lower costs and enhanced service quality (5). Critical factors propelling health tourism include affordability, high-quality services, accessible healthcare, and the opportunity to combine medical treatment with leisure travel (2,6,7). Travelers' motivations vary depending on their country of origin and destination. Factors such as superior treatment quality and diverse treatment options are associated with the destination, whereas high costs, prolonged wait times, and limited healthcare access are common issues in the traveler's home country. Furthermore, individuals may seek medical care abroad for vacation purposes to gain both leisure and dental services, or they may be drawn by the destination's religious, cultural, or geographic appeal (2,6,8).

The American Dental Association defines dental tourism, a subset of medical tourism, as traveling to another country to receive dental treatment (9). Beyond offering individual benefits, dental tourism contributes to economic advantages for the nations involved by generating substantial foreign currency earnings for countries that provide healthcare services, thus playing a crucial role in their economic development (10). The global dental tourism market was es-

timated to be valued at approximately USD 13.35 billion in 2024, with projections indicating an increase to around USD 97.93 billion by 2034 (11). Mexico holds a 25% share of the global dental tourism market and attracts the majority of dental tourists (12). Due to its geographic proximity, most visitors to Mexico come from the neighboring United States (13). Hungary, India, Thailand, Croatia, and Türkiye are also notable players in dental tourism (4,13).

Health tourism has become an important and promising sector of the Turkish economy. In 2024, a total of 1,506,442 individuals sought healthcare services in Türkiye, generating revenue of USD 3,022,957 (14). Türkiye possesses a competitive advantage in health tourism due to its accessible and central geographic location, supportive government policies, and healthcare transformation programs (6,7). Additional contributing factors include the accessibility of healthcare services, reduced waiting times, and the relative ease of obtaining a visa (6). According to data from the Organization for Economic Co-operation and Development (OECD), Türkiye exhibited the lowest healthcare service costs among OECD nations in 2019 (15). Türkiye is increasingly gaining recognition in dental tourism, driven by a rising influx of international patients. Besides offering high-quality dental treatments, travel and accommodation costs are considerably lower than in European countries, boosting Türkiye's appeal as a dental tourism destination (2,7,10). The countries that send patients to Türkiye include those with substantial Turkish populations, developing nations with insufficient resources and healthcare professionals, countries with high healthcare costs and limited insurance coverage, nations facing long wait times and resource shortages, and countries with bilateral agreements that allow the unrestricted referral of a specified number of patients to Türkiye (16).

Similar to other regions globally, the number of studies on dental tourism in Türkiye is increasing, with research being conducted across various areas in the country. However, the dynamics of dental tourism and the profiles of dental tourists visiting each locality exhibit distinct differences (5,10,12,17). Therefore, researching different destinations within Türkiye is imperative to ascertain the overall profile of dental tourists arriving in the country. A review of current

studies reveals a lack of research conducted in Istanbul, Türkiye's leading dental tourism destination. This study investigates the motivations of tourists who choose Türkiye as their dental care destination at a private hospital's dental clinic in Istanbul. According to the study's hypothesis, the primary factors influencing patients' preferences for dental treatment in Türkiye include the affordability of treatment costs, confidence in dentists' expertise, ease of scheduling appointments, and the ability to complete treatment quickly.

## MATERIAL AND METHODS

The population of this study consisted of foreign patients who applied to the İstanbul Atlas University Hospital. The sample size was calculated at a 95% confidence level. Within the past 12 months, 34,697 foreign patients visited the hospital, of whom 456 were treated in the dental clinic. Considering the total patient population of 34,697 and the number of patients within the target profile of 456, the prevalence rate was calculated as  $456/34,697 = 0.013$ . With a significance level of  $\alpha = 0.05$ , the z-statistic value is 1.96. Based on these parameters, the minimum sample size required for the study was 30.

This cross-sectional study utilized a quantitative research methodology, specifically a questionnaire-based survey instrument. The survey form was meticulously devised by adapting prior research on health tourism and aligning it with the specific objectives of the current study (17,18). The questionnaire comprised 29 items categorized into two sections. The initial section contained six inquiries regarding the demographic characteristics of the participants. The subsequent section encompassed 23 inquiries aimed at elucidating the participants' motivations for selecting Türkiye as a destination for dental treatment, as well as their experiences throughout the treatment process. The inquiries included both single-choice and multiple-choice formats. Foreign patients seeking dental care at the İstanbul Atlas University Hospital were supported by interpreters throughout all diagnostic and treatment procedures, ensuring effective communication with medical staff. The researchers conducted data collection through face-to-face interviews, facilitated by interpreters. This data collection

occurred between March 24, 2023, and February 29, 2024. Fifty-two foreign patients participated in the survey. Participants in the study were patients aged 18 and older who sought services at the hospital's dental clinic and provided consent to participate. Individuals who refused to participate or did not complete the questionnaire were excluded from the study.

This cross-sectional study was approved by the Non-Interventional Research Ethics Committee of İstanbul Atlas University (date: 11.01.2023, decision no: E-22686390-050.99-24351).

## Statistical analyses

In the present study, descriptive statistics, specifically frequency and percentage, were employed. Pearson's Chi-Square test was applied when expected values were greater than 5 to test relationships between categorical variables. When this assumption was not met, Fisher's exact test was used. For questions with multiple responses, the Multiple Chi-Square test was applied. All analyses were conducted using the SPSS Statistics for Windows (Statistical Package for the Social Sciences package program version 25.0, IBM Corp., Armonk, N.Y., USA). The significance level was  $p < 0.05$ .

## RESULTS

Descriptive statistics on the demographic characteristics of the participants, along with their responses to questions about preferences in dental tourism, were presented in a table (Table 1). The distribution of patients from the African continent ( $n = 28$ ) is detailed as follows: Guinea ( $n = 10$ ), Senegal ( $n = 6$ ), Benin ( $n = 2$ ), Gabon ( $n = 2$ ), Mali ( $n = 2$ ), Burkina Faso ( $n = 1$ ), Eritrea ( $n = 1$ ), Ivory Coast ( $n = 1$ ), Chad ( $n = 1$ ), Niger ( $n = 1$ ), and Congo ( $n = 1$ ). The distribution of patients from Europe ( $n = 17$ ) is categorized as follows: the United Kingdom ( $n = 6$ ), France ( $n = 5$ ), Bulgaria ( $n = 3$ ), the Netherlands ( $n = 2$ ), and Switzerland ( $n = 1$ ). The distribution of patients from the Americas ( $n = 3$ ) includes Canada ( $n = 2$ ) and Brazil ( $n = 1$ ). Finally, the distribution of patients from the Middle East ( $n = 4$ ) comprises Iraq ( $n = 3$ ) and Palestine ( $n = 1$ ). Approximately 94% of dental tourists chose to travel to Türkiye primarily due to the affordability of treatment prices.

Table 1. Distribution of participants' demographic data and their preferences regarding dental tourism.

		n	%
1. Gender	Total	52	100
	Female	22	42.3
2. Age	Male	30	57.7
	18-30	8	15.7
	31-40	18	35.3
	41-50	13	25.5
3. Education	51-60	7	13.7
	61-70	4	7.8
	71 and above	1	2.0
	Literate	2	3.8
	High school	16	30.8
4. Marital Status	University	33	63.5
	Master's degree	1	1.9
	Married	31	59.6
5. Employment Status	Single	21	40.4
	Self-employed/employer	10	19.2
	Salaried employee	32	61.5
	Unemployed	3	5.8
	Retired	3	5.8
6. Geographical region	Housewife	3	5.8
	Student	1	1.9
	Africa	28	53.8
	Europe	17	32.7
	Middle East	4	7.7
7. Have you been to Türkiye before?	America	3	5.8
	Yes	28	53.8
8. If yes, what was the purpose of your visit?	No	24	46.2
	Vacation	13	41.9
	Business	5	16.1
	Treatment	14	45.2
	Other	3	9.7
9. Do you have any other purpose in Türkiye besides treatment?	Vacation	23	85.2
	Business	3	11.1
	Other	4	14.8
	Yes	12	23.1
10. Will you visit another city outside of Istanbul?	No	40	76.9
	Yes	12	23.5
11. Did you visit the dental clinic for an emergency?	No	39	76.5
	Self-paid	49	94.2
12. How do you cover the costs of your dental treatment?	Government insurance	3	5.8
	Yes	21	40.3
13. Did you come to Türkiye just for dental treatment?	No	31	59.7
	Hair transplant	5	16.1
14. If not, what other treatments will you undergo?	Obesity surgery	5	16.1
	Aesthetic surgery	1	3.2
	Other	20	64.5
15. How did you cover your accommodation and ticket expenses?	Self-paid	40	76.9
	Agency	9	17.3
	Other	3	5.8
	High costs	26	52.0
16. Reasons for not having dental treatment in your own country	Lack of technological facilities	21	42.0
	Difficulty in accessing dentists/appointments	28	56.0
	Insufficient dentist education	12	24.0
	Lack of hygiene conditions	7	14.0
17. Did you compare Türkiye with other countries before coming?	Yes	6	11.5
	No	46	88.5
18. Which countries did you research?	Bulgaria	2	33.3
	Hungary	1	33.3
	Romania	1	50
	Macedonia	1	16.7
	Affordable treatment prices	47	94.0
19. Reasons for choosing Turkey for dental treatment	Technological facilities	30	60.0
	Dentists experiment	41	82.0
	Short treatment duration	43	86.0
	Easy appointment scheduling	39	78.0
	Some treatments unavailable in home country	10	20.0
	Low travel and accommodation costs	26	52.0
	Proximity to home country	3	6.0
	Cultural and religious affinity	2	4.0
	Many tourist attractions in Turkey	7	14.0
	Internet	14	26.4
20. Where did you get information about this hospital?	Promotion office/agency	41	77.4
	Family or friend recommendation	9	17.0
	Other	4	7.5
	Yes	21	40.3
21. Did you have a treatment plan before coming?	No	31	59.7
	Yes	8	38.0
22. If yes, did the treatment plan change?	No	13	62.0
	Yes	6	11.5
23. Was a warranty period given for your treatments?	No	46	88.5
	No	27	51.9
24. Did you send any documents before your arrival?	Radiography	8	15.4
	Intraoral photo	22	42.3
25. Have you communicated with anyone who has had dental treatment in Türkiye before?	Yes	28	53.8
	No	24	46.2
26. If yes, what were the comments?	Positive	17	60.7
	Mixed	11	39.3
27. Have you heard any reviews about dental treatments in Türkiye on social media?	Yes	44	84.6
	No	8	15.4
28. If yes, what were the comments?	Positive	15	34.1
	Mixed	29	65.9
29. If you face any issues after returning home, would you come back?	Yes	29	55.8
	No	1	1.9
	Not sure	22	42.3

**Table 2.** The relationships between participants' geographical origins and their responses to inquiries regarding demographic characteristics and preferences for dental tourism

		Africa	Europe	Middle East	America	Test Statistic	P
		n (%)	n (%)	n (%)	n (%)		
1. Have you been to Türkiye before?	Yes	11(39.3)	15(88.2)	1(25)	1(33.3)	12.777	0.002*
	No	17(60.7)	2(11.8)	3(75)	2(66.7)		
2. If yes, what was the purpose of your visit?*	Vacation	1(7.1)	12(80)	0(0)	0(0)	45.806	<0.001*
	Business	2(14.3)	2(13.3)	0(0)	1(100)		
	Treatment	11(78.6)	3(20)	0(0)	0(0)		
	Other	0(0)	2(13.3)	1(100)	0(0)		
3. Do you have any other purpose in Türkiye besides treatment?*	Vacation	11(91.7)	9(81.8)	0(0)	3(100)	17.732	0.038*
	Business	1(8.3)	1(9.1)	1(100)	0(0)		
	Other	1(8.3)	3(27.3)	0(0)	0(0)		
4. Will you visit another city outside of İstanbul?	Yes	2(7.1)	1(5.9)	0(0)	3(100)	12.755	0.002*
	No	26(92.9)	16(94.1)	4(100)	0(0)		
5. Will you visit another city outside of İstanbul?	Yes	4(14.3)	5(29.4)	2(50)	1(33.3)	3.984	0.200
	No	24(85.7)	12(70.6)	2(50)	2(66.7)		
6. How do you cover the costs of your dental treatment?	Self paid	28(100)	17(100)	1(25)	3(100)	15.758	<0.001*
	Government insurance	0(0)	0(0)	3(75)	0(0)		
7. Did you come to Türkiye just for dental treatment?	Yes	11(39.3)	7(41.2)	1(25)	2(66.7)	1.351	0.800
	No	17(60.7)	10(58.8)	3(75)	1(33.3)		
8. If not, what other treatments will you undergo?	Hair transplant	1(5.9)	3(30)	0(0)	1(100)		
	Obesity surgery	2(11.8)	3(30)	0(0)	0(0)	12.780	0.146
	Aesthetic surgery	1(5.9)	0(0)	0(0)	0(0)		
	Other	13(76.5)	4(40)	3(100)	0(0)		
9. How did you cover your accommodation and ticket expenses?	Self-paid	22(78.6)	14(82.4)	1(25)	3(100)	15.579	0.004*
	Agency	6(21.4)	3(17.6)	0(0)	0(0)		
	Other	0(0)	0(0)	3(75)	0(0)		
10. Reasons for not having dental treatment in your own country*	High costs	6(21.4)	16(94.1)	1(50)	3(100)	72.842	<0.001*
	Lack of technological facilities	19(67.9)	1(5.9)	1(50)	0(0)		
	Difficulty in accessing dentists/ appointments	21(75)	4(23.5)	2(100)	1(33.3)		
	Insufficient dentist education	11(39.3)	1(5.9)	0(0)	0(0)		
	Lack of hygiene conditions	6(21.4)	0(0)	1(50)	0(0)		
11. Did you compare Türkiye with other countries before coming?	Yes	2(7.1)	4(23.5)	0(0)	0(0)	2.8872	0.358
	No	26(92.9)	13(76.5)	4(100)	3(100)		
12. Reasons for choosing Türkiye for dental treatment*	Affordable treatment prices	27(96.4)	16(94.1)	1(50)	3(100)	82.192	<0.001*
	Technological facilities	22(78.6)	4(23.5)	2(100)	2(66.7)		
	Good dentists	23(82.1)	15(88.2)	1(50)	2(66.7)		
	Short treatment duration	24(85.7)	16(94.1)	0(0)	3(100)		
	Easy appointment scheduling	22(78.6)	13(76.5)	1(50)	3(100)		
	Some treatments unavailable in home country	9(32.1)	0(0)	1(50)	0(0)		
	Low travel and accommodation costs	15(53.6)	7(41.2)	1(50)	3(100)		
	Proximity to home country	0(0)	3(17.6)	0(0)	0(0)		
	Cultural and religious affinity	1(3.6)	0(0)	1(50)	0(0)		
	Many tourist attractions in Turkey	4(14.3)	0(0)	1(50)	2(66.7)		
13. Where did you get information about this hospital?*	Internet	9(32.1)	1(5.9)	2(50)	2(66.7)	19.693	0.073
	Promotion office/agency	24(85.7)	13(76.5)	3(75)	1(33.3)		
	Family or friend recommendation	4(14.3)	4(23.5)	0(0)	0(0)		
	Other	1(3.6)	1(5.9)	1(25)	1(33.3)		
14. Did you have a treatment plan before coming?	Yes	9(32.1)	12(70.6)	0(0)	0(0)	10.879	0.005*
	No	19(67.9)	5(29.4)	4(100)	3(100)		
15. If yes, did the treatment plan change?	Yes	2(22.2)	6(50)	0(0)	0(0)	-	0.367
	No	7(77.8)	6(50)	0(0)	0(0)		
16. Was a warranty period given for your treatments?	Yes	2(7.1)	4(23.5)	0(0)	0(0)	2.872	0.358
	No	26(92.9)	13(76.5)	4(100)	3(100)		
17. Did you send any documents before your arrival?*	No	14(51.9)	7(41.2)	2(50)	3(100)	8.398	0.495
	Radiography	6(22.2)	2(11.8)	0(0)	0(0)		
	Intraoral photo	12(44.4)	8(47.1)	2(50)	0(0)		
18. Have you communicated with anyone who has had dental treatment in Türkiye before?	Yes	10(35.7)	15(88.2)	1(25)	2(66.7)	13.762	0.001*
	No	18(64.3)	2(11.8)	3(75)	1(33.3)		
19. If yes, what were the comments?	Positive	9(90)	7(46.7)	1(100)	0(0)	8.035	0.017*
	Mixed	1(10)	8(53.3)	0(0)	2(100)		
20. Have you heard any reviews about dental treatments in Türkiye on social media?	Yes	23(82.1)	17(100)	1(25)	3(100)	11.018	0.006*
	No	5(17.9)	0(0)	3(75)	0(0)		
21. If yes, what were the comments?	Positive	10(43.5)	3(17.6)	1(100)	1(33.3)	4.863	0.104
	Mixed	13(56.5)	14(82.4)	0(0)	2(66.7)		
22. If you face any issues after returning home, would you come back?	Yes	12(42.9)	16(94.1)	1(25)	0(0)	23.928	<0.001*
	No	0(0)	0(0)	0(0)	1(33.3)		
	Not sure	16(57.1)	1(5.9)	3(75)	2(66.7)		

\*p < 0.05

Around 86% cited the short duration of treatments as a reason for their choice, while 82% expressed trust in dentists in Türkiye. Additionally, 78% preferred Türkiye for the ease of scheduling appointments, and 60% indicated the technological facilities available. Around 52% of tourists were motivated by low travel and accommodation costs, 20% noted that some treatments were unavailable in their home country, 14% were fascinated by the numerous tourist attractions in Türkiye, 6% cited proximity to their home country, and 4% indicated a cultural and religious affinity.

The relationships between gender and responses to inquiries regarding demographic characteristics and preferences in dental tourism were analyzed utilizing Pearson's chi-square, Fisher's exact, and multiple chi-square tests. The analysis indicated no statistically significant association between gender and responses pertinent to demographic characteristics and dental tourism preferences ( $p > 0.05$ ). Consequently, the distribution of demographic characteristics and dental tourism preferences was found to be homogeneous across genders.

Fisher's exact test and multiple chi-square tests were employed to investigate the relationships between participants' geographical origins and their responses to inquiries regarding demographic characteristics and preferences for dental tourism (Table 2). The analyses revealed statistically significant correlations between geographical origin and the following variables: previous visits to Türkiye, the purpose of the visit, the presence of additional objectives beyond treatment, intention to visit other cities apart from Istanbul, methods of financing dental treatment in Türkiye, coverage of accommodation and travel expenses, reasons for abstaining from dental treatment in their home countries, rationale for selecting Türkiye over alternative destinations, sources of information about the hospital, existence of a treatment plan before arrival, communication with individuals who had previously undergone dental treatment in Türkiye, opinions solicited from such individuals, exposure to social media comments concerning dental treatment in Türkiye, and willingness to return to Türkiye in the event of complications after returning ( $p < 0.05$ ). It was observed that most individuals from Africa had previously traveled to Türkiye for medical treatment, while

a considerable number of Europeans had visited for leisure purposes.

Individuals from Africa reported that the reasons for not seeking dental treatment in their home countries include high costs, inadequate technological resources, challenges in securing appointments, insufficient education among dental professionals, and unsatisfactory hygiene conditions. Conversely, European visitors identified high prices and difficulties in obtaining appointments as their primary concerns. Furthermore, all individuals from the Middle East stated that securing an appointment was challenging. The predominance of African visitors was attributed to the unavailability of specific treatments in their respective countries. While many Europeans expressed willingness to revisit Türkiye if health issues arise after their return, a significant segment of visitors from Africa and the Middle East remained uncertain about this. Moreover, visitors from the American continent did not convey any intention to return.

## DISCUSSION AND CONCLUSION

Many dental tourists visit Türkiye each year to receive treatment while enjoying a vacation in popular holiday destinations in the Aegean and Mediterranean regions. However, in terms of population, Istanbul, Türkiye's largest city, is an important center for dental tourism, with over a thousand dental clinics holding health tourism authorization certificates (2,19). This study was conducted at a private hospital in Istanbul and aimed to investigate why dental tourists who applied to this hospital chose Türkiye for their treatment. The study results showed that the main reasons participants chose Türkiye for dental treatments were affordability, trust in dentists' experience, and the convenience of scheduling and completing treatments quickly. Since these results support the study's hypothesis, it was accepted.

In dental tourism, patients most commonly obtain information about the countries and institutions where they will receive treatment through the internet, word-of-mouth marketing, and intermediary agencies (2,5,17,20). Due to their ability to engage a broad audience, websites and online advertisements are routinely used to promote international dental tourism (21).



It is even believed that the internet is largely driving the rapid development of dental tourism by enabling quick, direct connections between healthcare providers and individuals seeking such services, thereby significantly contributing to the advancement of dental tourism (2). Dental tourism enterprises and clinics are progressively advertising “all-inclusive” travel packages via the internet, comprising dental procedures, hotel accommodations, sightseeing excursions, and airline tickets (7). In addition to providing information about services, websites enable potential patients to peruse reviews and experiences of previous patients who have undergone treatment (4,7,10). With advancements in information and communication technologies, websites and social media platforms have also become integral components of dental clinics’ marketing strategies (22). It has been observed that dental clinics engaging in dental tourism in Kuşadası (İzmir, Türkiye) commonly utilize websites and social media for advertising and promotion. More than 50% of these clinics have indicated that the most effective way for patients to reach them is through recommendations from satisfied patients, while others highlighted the power of their social media presence (10). Furthermore, word-of-mouth marketing remains a vital source of information and the oldest communication method, where consumers informally share their positive or negative experiences with others. Word-of-mouth marketing can influence consumers’ purchasing decisions both positively and negatively, affecting the identification and evaluation of options and the decision-making process (20,22). In dental tourism, patients returning to their home countries after successful treatments often share their experiences with friends and family, which tend to be more impactful and persuasive than other information sources (4,5,17).

Word-of-mouth communication occurs through direct interaction or via social networks (10). A digital variant of word of mouth is social media reviews, which disseminate rapidly and at minimal cost, potentially reaching a global audience within seconds and significantly impacting consumer behavior and perception (22). In electronic word of mouth, information and reviews about products and services are permanently archived within internet databases. Electronic word of mouth is regarded as an effective com-

munication tool because it allows rapid access to large audiences, provides lasting data to prevent information loss, and continuously meets information needs while maintaining ongoing communication (22). This marketing approach wields considerable influence within the tourism sector. As intangible services, such as those in tourism, cannot be appraised before consumption, acquiring these services is perceived as entailing a heightened risk. Therefore, consumers tend to rely more heavily on the interpersonal influence of electronic word of mouth (22). Research has demonstrated a positive correlation between electronic word of mouth and trust in travel destinations, intentions, and objectives (5,20). In a study conducted in Antalya (Antalya, Türkiye), more than half of the patients learned about dental treatment services from relatives or friends, with the rest obtaining information from sources such as the internet, intermediary agencies, and foreign offices. Dental tourists who visited this destination obtained information from various sources, but they planned their trips individually (17). In a study conducted in Trabzon, the sources of information utilized by individuals benefiting from dental tourism were ranked as follows: recommendations from acquaintances topped the list, followed by social media in second place, and the internet in third. It was found that patients who received recommendations generally contacted their dentists directly (5). Most patients traveling from Switzerland to Germany for dental treatment stated that their relatives had previously received dental treatment in Germany and that these relatives and friends had referred them to the dentist they visited (23). In their study, Gönül and İçöz (12) stated that the most critical factors influencing dental tourists’ choices of Didim (Aydın, Türkiye) were recommendations, ease of communication, sources of information, comments from those who had previously received dental services, and service quality.

Of the patients enrolled in the present study, 77.4% obtained information about the hospital through an agency. However, 53.8% reported talking with individuals who had previously undergone dental treatment in Türkiye, and 84.6% indicated they had read comments about dental treatments in Türkiye on social media. While some patients encountered only positive remarks, most reported receiving both posi-

tive and negative feedback. Interestingly, none of the participants reported experiencing only negative feedback, likely because such feedback may have discouraged them from initially seeking treatment in Türkiye. Although most patients gathered hospital information via agencies, their engagement with former patients and research on social media suggest that their decision-making involved multiple channels and sources of information.

Due to its strategic geographical position, Türkiye is an attractive hub for medical tourism, particularly for regions such as the Middle East, Europe, and Africa (6). In this study, over 50% of the international patients seeking treatment at the hospital's dental clinic were from Africa, followed by Europe. Research conducted at various centers across Türkiye indicates that dental tourists come from specific countries, depending on the region. For example, clinics in the tourist town of Kuşadası (Aydın, Türkiye) predominantly cater to patients from the United Kingdom and Ireland. In contrast, clinics in Alanya attract more patients from Scandinavian countries than other areas. Additionally, these clinics provide dental care to Turkish citizens living in Europe, especially in Germany, as well as emergency dental services to cruise passengers arriving at Kuşadası Port (10,17). In Didim, many patients are from the British Isles, including England, Scotland, Northern Ireland, and Wales (12). This concentration may result from the influence of word-of-mouth communication, which plays a crucial role in selecting treatment centers. Recommendations from acquaintances often lead patients to select centers they have visited before, creating regional concentrations of dental tourists from the same countries.

The phenomenon of tourists selecting their treatment destinations based on vacation preferences is known as "tourism appeal" (12). Among dental tourists visiting Kuşadası and Alanya, there were no patients from Africa (10,17). This is likely because these regions are popular among European tourists, particularly for summer holidays, while African tourists may have less awareness of these destinations. However, a study conducted in Didim, another well-known summer tourism destination, found that tourism appeal was not a significant factor in destination preference among dental tourists (12). Didim has a large popula-

tion of British residents who reside there year-round. It is highly likely that recommendations from local residents play a motivating role in attracting dental tourists from those countries.

In health tourism, it has been noted that shared language, cultural similarities, and geographical proximity are significant factors influencing patient preferences (7,13). Zhang et al. stated that cultural, linguistic, political, and economic factors, rather than geographical proximity, determine dental tourists' destination choices (24). It has been observed that Swiss patients living near the German border prefer Germany for dental tourism because of lower treatment costs, cultural closeness, and shared language, as they are neighboring countries. Furthermore, the proximity of the border and the convenience of crossing between European nations impact patient preferences (23). In this study, most dental tourists who visited the hospital did not express an opinion that geographical, cultural, or religious proximity affected their preference for Türkiye. However, it is important to note that most of these patients came from nearby regions such as Africa, Europe, and the Middle East. Flights from these areas to Türkiye are significantly shorter than intercontinental flights, which helps lower travel costs and reduces treatment periods.

The popularity of dental tourism can largely be attributed to the relatively brief duration of treatment and recovery, allowing patients to enjoy leisure activities (5). In this study, most European participants reported prior visits to Türkiye for vacation, while most from Africa visited for medical treatment. Many patients also intended to merge their dental treatment with recreational activities during their stay. However, the wide range of travel destinations in Türkiye did not emerge as a particularly appealing factor for the dental tourists in this study, with a considerable proportion indicating they would not consider traveling outside of Istanbul.

The primary factors influencing the selection of a destination in medical tourism include affordability, accessibility, and acceptable quality (25). While insurance policies in various nations encompass essential healthcare services, they typically exclude dental treatments. In many countries, numerous dental procedures fall outside the scope of national health insur-



ance or publicly funded health services. National insurance systems often cover only a limited array of dental treatments; consequently, for procedures outside this framework, patients must either contend with substantial out-of-pocket expenses or bear the entire cost themselves (8). This predicament compels patients to seek more affordable alternatives abroad, heightening the demand for international dental services (2,7,26). A study conducted in Indonesia and South Korea revealed that most participants who perceived their countries as having satisfactory dental services were largely uninformed about dental tourism and reluctant to consider it.<sup>27</sup> Research indicates that cost advantage is the primary motivating factor that encourages individuals to pursue dental tourism (5,7,8,17). This study corroborates that the primary reasons patients opted for Türkiye for dental tourism included affordable treatment costs, trust in dental professionals' experience, advanced technological capabilities, ease of appointment scheduling, short treatment durations, and low travel and accommodation expenses. The most significant reasons for patients not seeking treatment in their home countries included high costs, challenges accessing dental care, and a lack of technological resources. Additional factors among patients from Africa included the unavailability of specific treatments, insufficient dental education of dentists, and inadequate hygiene conditions. For European patients, the predominant factor influencing their decisions was the elevated cost of treatments within their respective countries. Kaçmaz and Korkmaz (17) reported that the pursuit of economically accessible treatment constituted the primary determinant in preferences for dental tourism. In contrast, factors such as "lack of access to treatment" and "seeking higher-quality treatment" were not deemed significant. However, for Swiss patients residing near the German border, the availability of advanced technical equipment emerged as an essential consideration (23). In another study, 31% of participants indicated that price differences between Germany and other countries influenced their decision to choose dental tourism, while 92% emphasized the importance of quality (17). The variations in findings across these studies may be attributed to the differences in healthcare systems in the participants' countries of origin. Another critical reason for den-

tal tourism is the long waiting times for dental care in patients' home countries (8,26). This study also found that shorter waiting periods were a significant factor in selecting Türkiye for dental treatment.

Although those who travel abroad for dental tourism generally exhibit similar characteristics to those involved in the medical tourism movement, there are fundamental differences between medical tourism and dental tourism (5). One key distinction is that dental tourism is typically less focused on emergencies, as dental problems usually do not present immediate threats to life. Unlike medical emergencies, dental issues are rarely life-threatening and can often be postponed until after traveling (5). In this study, 23.5% of patients who sought treatment at the hospital did so for emergency cases. Research conducted in Kuşadası revealed that patients seeking care at local clinics included those with urgent dental needs who arrived via cruise ships at Kuşadası Port (10). Although not life-threatening, individuals visit dentists for unplanned treatments, especially since problems such as toothache and dental trauma disrupt their daily comfort.

While health tourism offers numerous benefits, it also has several disadvantages. Patients may experience adverse effects due to inadequate services or the failure to deliver promised treatments. Furthermore, managing complications upon returning to their respective home countries can present substantial challenges. Identifying a dental professional in one's home country who can handle post-treatment issues at a reasonable cost may prove difficult (8,26). Disparities in clinical training across various nations may also lead to inconsistencies in subsequent treatments provided elsewhere (7). Another notable drawback is the absence of routine follow-up care after treatment. Dental practitioners in patients' home countries often exhibit reluctance to treat individuals who have received care abroad, particularly when complications arise. Therefore, it is essential that patients have the option to return to the country of treatment if any issues arise (8). In this study, 55.8% of participants indicated that they would consider returning to Türkiye if they encountered difficulties with their treatment. The majority of European patients (94.1%) and approximately half of African patients (42.9%) expressed a willingness to return if necessary.

This study has certain limitations. Specifically, it relies on the perspectives of patients who sought treatment at a dental clinic in a hospital in Istanbul. Therefore, the findings may not be sufficiently robust to draw general conclusions regarding the dental tourism market in Türkiye. Many dental clinics across Istanbul and other parts of Türkiye are known to cater to patients seeking dental tourism. Future research at distinct centers involving larger sample populations will likely yield more varied data. However, the reluctance of dental clinics and agencies to permit external researchers to conduct surveys with their patients poses a significant challenge for researchers. Moreover, the information from patients via surveys tends to reflect individual viewpoints. Involving employees from healthcare providers and agencies that support dental tourism in future studies will enable a more thorough understanding of this phenomenon.

In conclusion, the majority of dental tourists among the study participants obtained information about the hospitals they visited through various agencies, engaged in discussions with individuals who had previously received treatment in Türkiye, and conducted research via social media platforms. The findings suggest that dental tourists' decision-making processes for selecting destinations are not confined to a single channel; instead, they utilize a diverse array of informational sources. Within the limitations of the study, the most critical factors influencing patients' choice of Türkiye for dental tourism encompassed affordable treatment costs, a high level of trust in dental professionals, advanced technological facilities, the ease of securing appointments, short treatment durations, and minimal expenses associated with transportation and accommodation. Nevertheless, despite these advantages, the possibility that nearly half of the participants may not return to Türkiye if they experience problems following treatment could jeopardize the long-term sustainability of dental tourism.

### Conflict-of-interest and financial disclosure

The authors declare that they have no conflict of interest to disclose. The authors also declare that they did not receive any financial support for the study.

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