

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

An analysis of Feasibility of Medical Tourism in India

Prof. Paresh Patel¹, Tejashri D Limaye²

¹Assistant Professor, Parul Institute of Management and Research

ABSTRACT

The research analyzes the feasibility of Medical Tourism in India. It is becoming increasingly popular in India, with a projected value of \$5-6 billion by mid-2020. Medical Tourism refers to the travel of people abroad for medical treatment, initially for cosmetic or other surgeries, but also for dental tourism and fertility tourism

Keywords: India, Medical Tourism, Feasibility, Medical Tourist, Medical Treatments.

1. Introduction

Medical tourists seek treatment overseas. This first applied to developing country residents who travelled to rich countries' major medical centers for treatment unavailable at home. Medical tourism includes dental, fertility, and cosmetic surgery.

Health tourism involves medical treatments and services. It includes health-related tourism from preventative and health-promoting therapy to recovery and restorative travel. Like wellness tourism.

UK medical tourists want to avoid long wait periods, while American patients want to save money abroad. The UK and seven other wealthy nations, including the US, have very different death rates. The UK promotes medical tourism more than the US, according to a Harvard Business School expert. Canada, Cuba, Costa Rica, Ecuador, India, Israel, Jordan, Malaysia, Mexico, Singapore, South Korea, Taiwan, Thailand, Turkey, and the US enjoy medical holidays.

Some dislike medical tourism. Medical tourism harms high-standard countries like the US. Political issues may impact medical tourism. Medical tourism connects patients with doctors, hospitals, and other organizations.

India welcomes medical tourists. Medical tourism in India may reach \$5-6 billion by mid-2020. India has 056 medical tourists in 2017. Southeast Asia, the Middle East, Africa, and SAARC led medical tourism in India in 2019, according to the Federation of Indian Chambers of Business and Industry and Ernst & Young.

In February 2019, the government added medical visas to its e-tourism VISA system to encourage applications and streamline medical tourism. To increase applications and simplify medical tourism, the government integrated medical visas to its e-tourism VISA system in February 2019. India's healthcare is affordable, cutting-edge, and world-class. Western-trained doctors and English-speaking staff assist foreigners in India.

2. Review Papers

Foreign patients seeking affordable, high-quality care travel to India. India's medical tourism potential is hardly investigated. This study analyses academic stakeholders' most influential research using bibliometrics. Bibliometric - R analyses Scopus and Web of Science peer-reviewed journal articles from 2011 to 2021 to meet the study's objectives. The bibliometric study highlights Indian medical tourism most's referenced documents and authors, the top journals that publish MT publications, and the studies' keywords and sub-themes. Secondary data from government, ministry, and consulting firm papers and studies is used to predict future trends that may affect overseas medical tourists seeking treatment in India. (Amartya Ghosh, 2022)

Nigerians flock to India for medical tourism, according to this report. 50 people were qualitatively interviewed. According to the study, cheaper treatment and procedures, doctor referrals, aggressive agent marketing, top-notch healthcare services, access to human organs, treatment sponsors' preference, visa assurance, immediate healthcare services, Indian kidney transplant expertise, and quick turnaround time drove this drive. This was the first qualitative study on why Nigerians fly to India for medical tourism, and it illustrates how much money the country loses. India's achievements may aid Nigeria's health system. (Oluyemi Joseph, 2022)

Medical tourism affects host nation welfare and wage discrepancy, according to this study. Due to competition with public healthcare, medical tourism may reduce production worker wages and boost healthcare worker pay, lowering productivity and increasing wage disparity. Medical tourism harms society by decreasing public healthcare and labour productivity. Medical tourism's negative productivity impact on the host economy could be

²Student, Parul Institute of Management and Research

mitigated by welfare-improving tax subsidies. Theory matches medical tourism. (Beladi H,2022)

New coronaviruses have caused local, national, and global problems. The pandemic has affected medical tourism. Medical tourism's short-term concerns and how technology can help it grow are discussed in this article. (Arvind Chhabra, 2021)

Indian medical tourism is examined in this chapter. India's medical tourism sector runs on what? India's political and economic aspects have been analyzed to boost medical tourism. Hence, the chapter studies medical tourism's impact on India's economy. (Biswas, 2020)

Medical tourism (MT) involves overseas treatment. Unlike spa and wellness travel, medical tourism involves surgeons. Surgery or therapy is medical tourism. Medical tourism's classifications, drivers, hurdles, and quality criteria are covered in this chapter. Indian medical tourism's competitiveness is examined in this chapter. (Nadeem Ahmed Bashir, 2020)

Medical tourism in India is growing. \$7-8 billion in Indian medical tourism. India attracts medical tourists with its affordable, high-quality care. 30% growth in Indian medical tourism. Chennai is recognized as the "Health Capital of India" because it has the most medical tourism and multi- and superspecialty facilities that offer affordable, high-quality care. Medical tourism is promoted by India's tourism and health ministries. Patients can stay in India for treatment using the M-visa. (Kumaran Subbaraman, 2020)

Tourism is promoted by globalization together with trade and business. Patients can travel abroad for medical care. Tourists should research country-specific breakthroughs, technical and medicinal innovations, security, and privacy before choosing a medical tourism destination. This study demonstrates that medical tourists evaluate affordable medical prices, state-of-the-art medical equipment, dual medical treatment and tourism (vacation), and the host country's medical environment when choosing a medical tourism location. (Dr. Teena Bagga,2020)

Medical tourists' reasons for visiting India are better understood by this study. India's medical tourism industry requires this knowledge to compete globally. (Dash, 2020)

This study investigates N-600 patients' medical tourism to India and their demographics. Second-order structural model hypothesis findings met model-fit standards. Medical tourism, which combines medical treatment and vacation, depends on information search, surgery waiting time, hospital staff, precision, and quality accreditation. Supply-side stakeholders should collaborate to design medical traveler/tourist-centered care policies for better health outcomes, according to the findings. (Anita Medhekar, 2020)

Medical tourism from Myanmar has risen in Manipur in recent years. The Indian government's Act East Policy is also helping Manipur's best doctors' market medical tourism. Manipur spent a lot on healthcare last decade. The state's best hospitals and research institutions detect complicated medical concerns at affordable cost using cutting-edge technology. The prospects are strong, but Manipur's status as a "disturbed area" and difficult visa procedures for foreigners may hinder medical tourism, especially from neighboring nations. Medical tourism in Manipur is examined in this chapter. Data and literature inform exploratory research. (Sunildro LS Akoijam, 2019)

Travelers to India for medical care. Health tourism is private healthcare backed by the government and tourism. Mixing ancient Ayurveda, Yoga, Unani, Siddhi, and Homeopathy (AYUSH) with allopathic therapy and complex high-end medical surgeries like cancer, cardiac, and hip and knee replacements provides India a competitive advantage in health tourism. (Medhekar, 2019)

India's cheap, high-quality healthcare has spurred medical tourism. South Africa, Greece, Jordan, India, Malaysia, Philippines, and Singapore promote medical tourism. Technology, facilities, and labour make India a medical tourism destination. Medical tourism will reach \$8 billion by 2020 due to India's 50–70% savings. India is known for its affordable and high-quality medical care and easy medical visas. Medical tourism, which is growing 30% annually, is expected to boost the \$17 billion Indian healthcare market over the next six years. Secondary data from the Indian tourist department benefited medical practitioners in this study. This study evaluated medical tourism in India and abroad. Medical industry expansion in India is shown. (Arulmozhi,2019). Medical tourism is expanding in developing nations. Asian medical tourism marketing papers were reviewed from 2000 to 2017. Service quality and satisfaction attract medical visitors. Studies also cite a lack of medical market stakeholder coordination, quality, insurance coverage, and effective rules as barriers to medical travel. The findings suggest unique Asian medical marketing techniques. (Azim Zarei,2019)

Medical tourism competitiveness is compared in this study. According to relevant research and cross-country benchmarking studies, these regions' growing medical tourism competitiveness is due to a variety of cross-functional and sophisticated strategic resources and talents. These resources include medical specialty, international accreditations, infrastructure, and reputation. Competence benefits include holistic and comprehensive medical services and efficient and integrated health and tourist industries. These destinations have developed medical tourism strategic competencies through market focus and well-integrated plans, according to the research. Singapore's differentiation strategy has created an advanced medical tourism system, Thailand's best-cost provider approach has made it attractive, and India's diversity and cost leadership have made it a long-standing market. (Ahmed Husain Ebrahim, 2019)

Medical tourism research and predictions for India from 2014 to 2018. Medical tourism is expanding worldwide and in India. Medical visitors to India grew in 2014, 2015, and 2016. Medical tourism programmes are government-sponsored. This study used ARIMA trend projection to analyse medical tourism growth in India over the past five years and predict arrivals for the next two years. This article calculates them. Medical tourism may produce big foreign revenue, according to projections. India's cost and competency advantage can make it a top medical tourism destination if advertised. Government publicity is needed. IBIMA 2019 (IBIMA). (Ahire, 2019). Patient and healthcare professional travel and cross-border healthcare trade are promoted by medical tourism. Owing to market trends and patient needs, the Indian medical tourism industry is facing new ethical and regulatory challenges while improving health care. Medical tourist issues must be addressed. This study investigates India's medical tourism affordability. (Jain V., 2018)

India is a popular destination for patients who want economical medical care for various medical concerns and are dissatisfied by long waiting lists for medical and diagnostic procedures in their home countries. This report analyses the factors and their intensity affecting India's medical tourism business to help managers and policymakers create and promote the market. To analyse the intensity of variables affecting Indian medical tourism, a cross-sectional survey of major Indian hospitals and exploratory factor analysis, graph theory, and matrix technique were used. Cost, quality of treatment and care, availability of specialists, competitive advantage, and political, legal, and visa factors were obtained from 19 variables. By knowing changing intensity, healthcare administrators can handle them wisely. (V. Jain, 2018)

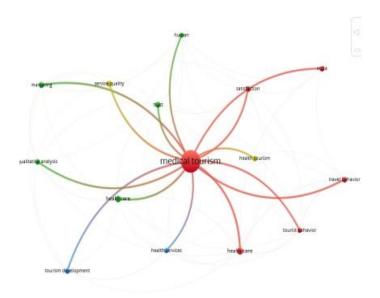
Halal-branded hospitals and medical facilities have emerged due to Muslim medical tourism worldwide and in India. Sharia law must be followed for

halal tourism to suit Muslims. The chapter focuses on halal medical tourism, which follows Sharia law to attract Islamic medical tourists. This chapter proposes a typology of Muslim medical tourists' cultural sensitivity, suggests branding and certifying Halal Medical Tourism hospitals, healthcare facilities, medications, products, and services to attract Muslim patients, and presents future research challenges and prospects. Global Health City, Chennai's first Halal hospital, is examined in this chapter. Based on Wilson and Liu's Muslim customer halal decision-making paradigm, it suggests halal branding for Indian Medical Tourism (2010). This model displays rational or emotional attitudes and affective and cognitive feelings for Muslim patients seeking halal care in halal hospitals. (Anita Medhekar F. H.,2018)

3. Research Methodology

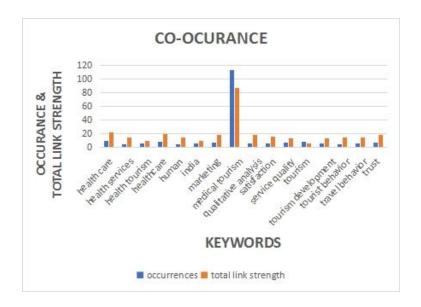
Co-occurrence, citation, and co-authorship were used to analyze data

1. Co- occurrence: -



This visualization covers Medical Tourism and related fields. Medical tourism dominates this image. Medical tourism is in the center and shows its related fields when we hover over it. As shown in the figure, there are also blur lines. These blur links show the linkages between the fields of the medical tourism. The above figure shows all the keywords selected for doing analysis.

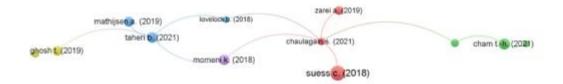
| keyword | occurrences | total link strength |
|----------------------|-------------|---------------------|
| health care | 9 | 22 |
| health services | 5 | 14 |
| health tourism | 6 | 10 |
| healthcare | 8 | 19 |
| human | 5 | 14 |
| india | 6 | 9 |
| marketing | 7 | 18 |
| medical tourism | 113 | 87 |
| qualitative analysis | 6 | 18 |
| satisfaction | 6 | 16 |
| service quality | 7 | 13 |
| tourism | 8 | 6 |
| tourism development | 6 | 13 |
| tourist behavior | - 5 | 15 |
| travel behavior | 6 | 14 |
| trust | 7 | 18 |



Medical Tourism is the most popular keyword, with the highest linked strength.

| CITATIONS DOCUMENTS | | | | | | |
|------------------------|-----------------|---|---------|--|--|--|
| document | citations links | | AVERAGE | | | |
| taheri b. (2021) | 42 | 5 | 8.4 | | | |
| chaulagain s. (2021) | 23 | 5 | 4.6 | | | |
| cham t.h. (2021) | 19 | 1 | 19 | | | |
| cham th. (2021) | 49 | 2 | 24.5 | | | |
| ghosh t. (2019) | 36 | 2 | 18 | | | |
| mathijsen a. (2019) | 39 | 1 | 39 | | | |
| zarei a. (2019) | 29 | 1 | 29 | | | |
| momeni k. (2018) | 41 | 2 | 20.5 | | | |
| suess c. (2018) | 81 | 1 | 81 | | | |
| lovelock b. (2018) | 19 | 2 | 9.5 | | | |
| zolfagharian m. (2018) | 26 | 2 | 13 | | | |
| tham a. (2018) | 26 | 1 | 26 | | | |

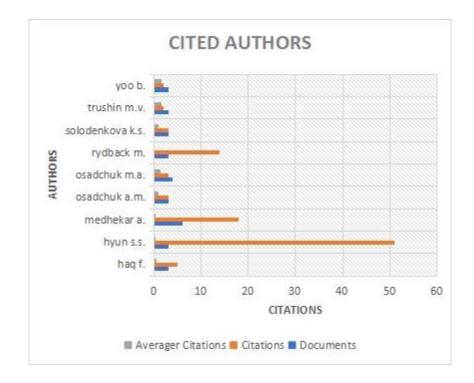
2. Citation: -



Clusters show authors who have worked together for research papers.

| Author | Documents | Citations | Averager Citations |
|------------------|-----------|-----------|--------------------|
| haq f. | 3 | 5 | 0.6 |
| hyun s.s. | 3 | 51 | 0.058823529 |
| medhekar a. | 6 | 18 | 0.333333333 |
| osadchuk a.m. | 3 | 3 | 1 |
| osadchuk m.a. | 4 | 3 | 1.333333333 |
| rydback m. | 3 | 14 | 0.214285714 |
| solodenkova k.s. | 3 | 3 | 1 |
| trushin m.v. | 3 | 2 | 1.5 |
| yoo b. | 3 | 2 | 1.5 |

2.1 CITATION (AUTHORS):-





Here two authors have cited each other's work.

2.2 CITATION (sources):-

| SOUTCE | documents | citations | total link strength | Average |
|---|-----------|-----------|---------------------|----------|
| asia pacific journal of tourism research | 5 | 56 | 5 | 11.2 |
| global developments in health care and me | 9 | 18 | 4 | 4.5 |
| he alth marketing quarte dy | 4 | 18 | 4 | 4.5 |
| journal of hospitality and tourism insights | 9 | 10 | 10 | 1 |
| journal of quality assurance in hospitality a | 4 | 16 | 14 | 1.142857 |
| journal of travel and tourism marketing | 5 | 105 | 7 | 15 |
| journal of travel research | 4 | 8 | 11 | 0.727273 |
| tourism management | 7 | 39 | 13 | 3 |
| tourism review | 3 | 81 | 3 | 27 |
| worldwide hospitality and tourism themes | 3 | 116 | 3 | 38.66667 |

The above- mentioned table tells us that the articles related to the comprehensive project are mostly published in worldwide hospitality and tourism themes.

FINDINGS

- India has abudant opportunities to compete with the other nations for Medical Tourism and to develop an quality healthcare system for it self.
- India's cost and competency advantage can make it a top medical tourism destination.
- Patients who want affordable medical care for various medical issues and are dissatisfied with long waiting lists for medical and diagnostic
 procedures in their home countries travel to India.
- As compared to developed nations like the USA, UK, the medical treatment in India is cheaper, has top-notch healthcare services, visa
 assurance, immediate healthcare services. This makes it feasible for the people living in the developing countries like to travel to India for
 availing medical treatments.
- India's culture and its diversity plays an important role in medical tourism in India.
- AYUSH i.e, Ayurveda, Yoga, Unani, Siddhi, and Homeopathy provides India with a competitive advantage in health tourism.

4, Conclusions:-

It can be noted that while the Indian health sector has drastically improved over the years, however, The challenges like follow-ups, infrastructure and many more challenges in healthcare sector are still visible. Online consultation, state of art facilities and easy way to commute is needed. Campaigns and advertisements should be increased to increase the medical tourism in India. Dedicated TPA desks who can offer concierge level service to travelling patients should be developed. Effective coordination with patients' insurance companies by having quick and international level communications team and Swift handling of administrative tasks with minimal patient participation will lead to increase in feasibility of medical tourism in India.

BIBLIOGRAPHY

Ahire, M. F. (2019). India's medical tourism analysis and forecasting. Proceedings of the 33rd International Business Information Management Association Conference, IBIMA 2019: Education Excellence and Innovation Management through Vision 2020, 4788-4796.

Sunildro LS Akoijam, T. K. (2019). Prospects and challenges of medical tourism: Evidences from Manipur. Global Developments in Healthcare and Medical Tourism, 265-276. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85121188774&doi=10.4018%2f978-1-5225-9787-

 $\underline{2.ch014\&partnerID} = 40\&md5 = 37c40bd916bcfce7ba347e9ac9713068$

Androutsou L., M. T. (2019). Measuring the efficiency of medical tourism industry in EU member states. Journal of Tourism Analysis, 115-130. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85087703697&doi=10.1108%2fJTA-02-2019-

0006&partnerID=40&md5=3b01aec766dc5e8527ba2bb4e04409b7

Arulmozhi, S. P. (2019). Medical tourism in India. International Journal of Recent Technology and Engineering, 695-698.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

85073549820&doi=10.35940%2fjjrte.B1123.0982S1019&partnerID=40&md5=c587235dfbce58af1be6b6c551c5979f

Baiev V.V., B. I.-L. (2019). The economic determinants of the world medical tourism industry development. Journal of Environmental Management and Tourism, 1392-1398. https://www.scopus.com/inward/record.uri?eid=2-s2.0-

Behera, S. K. (2019). Medical tourism in Visakhapatnam by People of South Odisha. Global Developments in Healthcare and Medical Tourism, 96-111. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85121190184&doi=10.4018%2f978-1-5225-9787-

2.ch006&partnerID=40&md5=8fbb7bffadff539840e159c3ab82e377

Ahmed Husain Ebrahim, S. G. (2019). A comparative analysis of medical tourism competitiveness of India, Thailand and Singapore. Tourism: An International Interdisciplinary Journal, 102-115. https://www.scopus.com/inward/record.uri?eid=2-s2.0-

 $\underline{85084183341\&partnerID} = 40\&md5 = bae0bb317439fb6b379fb236e793fb7b$

Akmal S. Hyder, M. R. (2019). Medical tourism in emerging markets: The role of trust, networks, and word-of-mouth. Health Marketing Quarterly, 203–219.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

85067617363 & doi=10.1080% 2 f 07359683.2019.1618008 & partner ID=40 & md5=ac1128 df f 4143 f 3 ea f cb215 f 1b6d 4db f

Medhekar, A. (2019). Emerging Trends of Wellness and Medical Tourism in India. Global Developments in Healthcare and Medical Tourism, 1-22.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-85121186445&doi=10.4018%2f978-1-5225-9787-1-5225-978-1-525-978-1

2.ch001&partnerID=40&md5=542412c83df55e77a09ca3f5fb1f9039

Medhekar, A. (2019). Emerging Trends of Wellness and Medical Tourism in India. Global Developments in Healthcare and Medical Tourism, 1-22.

 $\underline{2\&partnerID} \!\!=\!\! 40\&md5 \!\!=\!\! 01eef3891f517165e732cb38ade4a6d6$

Azim Zarei, F. M. (2019). Asian medical marketing, a review of factors affecting Asian medical tourism development. Journal of Quality Assurance in Hospitality and Tourism, 1-15.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

Afthanorhan A., A. Z. (2018). The effect of product quality, medical price and staff skills on patient loyalty via cultural impact in medical tourism. Management Science Letters, 1421-1428.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

85054520571&doi = 10.5267%2fj.msl.2018.10.004&partnerID = 40&md5 = b7388d0a289fc5aee0f527b370f0af5caee0f527b50f0af5cae

George B., H. T. (2018). Cross-cultural competence as a basis of the competitive advantage of the United States in medical tourism. Critical Essays in Tourism Research. 191-200.

Guha Roy D., M. S. (2018). Empirical research on CBBE scale for medical tourism. International Journal of Pharmaceutical and Healthcare Marketing, 348-370.

0074&partnerID=40&md5=ce51acdaaaf458bd586571052611d2ef

Iranmanesh M., M. S. (2018). The role of trust and religious commitment in Islamic medical tourism. Asia Pacific Journal of Tourism Research, 245-259.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

Jain V., A. P. (2018). Modelling the factors affecting Indian medical tourism sector using interpretive structural modeling. Benchmarking, 1461-1479. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85048875792&doi=10.1108%2fBIJ-03-2017-

0045&partnerID=40&md5=09fca211b71387698c9ec5751ccc4d4e

Jain V., A. P. (2018). Quantifying the variables affecting Indian medical tourism sector by graph theory and matrix approach. Management Science Letters, 225-240.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

 $\underline{85045049181\&doi=10.5267\%2fj.msl.2018.2.003\&partnerID=40\&md5=3d5c493bf36f313070ff7fffe965e521}$

Anita Medhekar, F. H. (2018). Halal Branding for Medical Tourism: Case of Indian Hospitals. Digital Marketing and Consumer Engagement: Concepts, Methodologies, Tools, and Applications, 1190-1212.

 $\underline{4.ch061\&partnerID} = 40\&md5 = 31405c3c1155ffbbb98d56ffd29bfc4c$

O.A., N. (2018). Finding out Shared Expert Opinion on the Development of Inbound Medical Tourism: The Case of Russia. European Research Studies Journal, 623-635.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

85058241750&doi = 10.35808% 2 fersj% 2 f1088&partner ID = 40&md5 = cb40 ff87197 f7dd1b607660be4151e5f1088&partner ID = 40&md5 = cb40 ff8719 f7dd1b60760be4151e5f1088&partner ID = 40&md5 = cb40 ff8719 f7dd1b60760be4151e5f1088&partn

Tang C.F., N. A. (2018). Can inbound medical tourism boost Malaysia's economic growth. Tourism and Hospitality Research, 505-513.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-

85030985988 & doi=10.1177% 2f1467358416682069 & partner ID=40 & md5=6 dc951 d62 a3 bce986932 bce3d760 e99860 e99860 bce3d760 e99860 e998600 e99860 e99860 e99860 e998600 e99860 e99860 e99860 e99860 e99860 e99860 e99860 e99860 e9986

Zolfagharian M., R. R. (2018). Determinants of medical tourism destination selection process. Journal of Hospitality Marketing and Management, 775-794.

https://www.scopus.com/inward/record.uri?eid=2-s2.0-