



Mirror, mirror on the wall, who's the fairest of them all? A critical content analysis on medical tourism



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ABSTRACT

Medical tourism continues to grow as the Internet helps individuals make appropriate choices and informed decisions. This study investigated two areas of medical tourism: cosmetic and dental procedures. The post-procedural experiences of 603 respondents who were medical tourists originating from different countries between 2008 and 2016 were analyzed using Leximancer software. The findings indicate commonalities in the identification of significant attributes of medical services received by respondents and their evaluations of cost, treatment effectiveness, and the time spent collecting healthcare information, as well as the recommendations they plan to make to friends and family. Further analyses showed that people who have undergone cosmetic surgery and dentistry use the same narratives to represent their medical experiences, although gender is an influential factor in how individuals evaluate different attributes of treatments.

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1. Introduction

Medical tourism is a growing trend in which individuals, travel overseas for medical treatment and healthcare benefits at a much lower cost compared to the travelers' own country (Lunt et al., 2011). This trend represents a lucrative economic opportunity for destinations focusing on medical tourism (Hopkins, Labonte, & Packer, 2010).

In the past decades, a large body of literature has emerged in the field of medical tourism (Seow, Choong, Moorthy, & Chan, 2017). Even though it has been a hot topic for some time, many research opportunities are still available. Most of the more recent literature in this field tackles fundamental questions such as the definition of medical tourism and the development of the medical tourism industry in destination countries (Crooks, Kingsbury, Snyder, & Johnston, 2010; Johnston, Crooks, & Ormond, 2015; Masoud, Alireza, Mahmoud, & Zahra, 2013). A large body of research has specifically focused on patient satisfaction with the quality of treatment (Connell, 2013; Han & Hyun, 2015). While the growth of medical tourism has attracted the attention of more researchers, the volume of publications is only slowly increasing (Ganguli & Ebrahim, 2017). Research on the sector is still scarce with regard to consumers' behavior, experiences related to particular

medical procedures, the impact of Internet searches, and the information available to make informed travel decisions (Connell, 2013; Cormany & Baloglu, 2011; Lunt, Hardey, & Mannion, 2010; Penney, Snyder, Crooks, & Johnston, 2011).

Few previous studies have included empirical research on experiences of cosmetic procedures reported online by medical tourists in the post-experience phase. This research gap can be bridged by probing the implications of unstructured user-generated reviews, thereby greatly improving the current understanding of medical tourism businesses' key drivers and priorities. In order to address this gap more fully, the present study investigated two areas of medical tourism: cosmetic and dental procedures.

The research had two main research objectives. It sought, first, to identify the dominant concepts and narratives shared by medical tourists online. The second aim was to explore gender differences regarding cosmetic and dental surgery. This study, therefore, followed the typology framework developed by Krippendorff (2012) for a standardized validation of textual content analyses.

In quantitative Web content analysis, the cited framework is particularly relevant when identifying key attributes in large text quotations, as well as word frequency and intensity. Thus, after medical tourists' post-procedural reviews were quantitatively summarized into interpretable attributes, the narratives could be analyzed qualitatively (Krippendorff, 2012) to provide guidelines for managers seeking to add or improve service attributes.

The present study's results contribute to the literature on actual, post-procedural experiences of medical tourists related to cosmetic

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and dental surgeries. These post-experience narratives include the impact of consumer satisfaction, Web-based information, and willingness to recommend to others in the context of an increasing interest in cosmetic and dental procedures in host countries. The findings have both theoretical and practical implications, including adding to the slowly growing body of literature on medical tourism and providing significant information to prospective medical tourists, healthcare service professionals, hoteliers providing accommodation services, and other medical tourism operators who have become part of consumers' total experience (Stumbo & Pegg, 2005). Furthermore, the present study identifies new themes based on semantic analyses that help to explore medical tourists' behaviors, feelings, and intentions.

This research's results suggest that the services provided by "clinics" is the strongest theme, followed by tourists' overall "treatment" experiences, the "time" needed to collect healthcare information, and "recommendations" made to others. Gender was found to be an important factor in how consumers evaluate different attributes of treatments. The present study thus offers a way to identify the most meaningful terms medical tourists use, taking research on this material a step further and structuring it for easy use in questionnaire-based studies.

This paper continues with a review of the relevant literature on medical tourism and the use of Web content to assess tourist experiences. The data and methodology are then presented, followed by the analyses' results. The penultimate section discusses the importance of these findings, followed by the conclusions.

2. Literature review

2.1. Medical tourism: context and factors

The literature provides no standard definition of medical tourism that has been accepted by all scholars. The term may have first been used to designate another tourism segment marketed by travel agencies and/or tour operators who traditionally sell holiday packages. Medical tourism has now become a combination of vacations and affordable cosmetic and dental procedures (Burkett, 2007). For this study's purposes, the definition used is that medical tourists are individuals who travel across international borders intending to receive some kind of medical treatment (Adams, Snyder, Crooks, & Johnston, 2015; Lunt et al., 2011).

Traveling abroad for healthcare benefits is not a new concept. In the eighteenth and nineteenth century, many Europeans traveled to remote locations to use spas considered to have health-enhancing properties (Condrea, Constandache, & Stanciu, 2014). The current form of this trend is to receive treatments ranging from cosmetic procedures to major invasive surgeries (Cormany & Baloglu, 2011). Among other demographic drivers of medical tourism demand, increased life-expectancy and an aging population in the West have played a significant role in generating a growing need for healthcare services (Connell, 2006). However, research focusing on the impact of other sociodemographic variables, such as age, gender, and existing health status and conditions, on the composition of the medical tourism market is still scarce (Lunt et al., 2011). The present study contributes to filling this gap by exploring gender differences in cosmetic surgery and cosmetic dentistry, which are the two most common types of procedures in medical tourism (Kelley, 2013). The treatments available abroad for these areas range from dental implants to multiple cosmetic surgeries (Connell, 2013; Kelley, 2013). Cost is found to be a strong determinant of the pursuit of cosmetic procedures because some forms of esthetic procedures are excluded from healthcare coverage (Lunt et al., 2011). Furthermore, patients seek optimal value for their money and think that foreign healthcare services often are of higher quality and much cheaper than these individuals' national services (European Hospital and Healthcare Federation, 2015). While the array of treatments available abroad for prospective medical tourists is large, the most common procedures driving the demand for medical tourism are cosmetic

treatments ranging from cosmetic dentistry to substantial cosmetic surgery (Connell, 2013; Kelley, 2013).

2.1.1. Cosmetic surgery

Retaining a youthful attitude and appearance is the zeitgeist that drives medical tourism (Öberg & Tornstam, 2001). Cosmetic surgery is in keeping with this spirit as it enables people to develop an image they find more self-fulfilling (Salehahmadi & Rafie, 2012). Women generally drive the demand for cosmetic surgery, for which several possible explanations have been suggested. These reasons are not necessarily mutually exclusive. One is that women in Western societies have options, resources, and opportunities to access a greater array of medical tourism choices (Wilson & Little, 2005). In addition, the larger number of older women has also increased the demand for cosmetic surgery (European Commission, 2014), with advertising for cosmetic procedures more exclusively targeting women (Ackerman, 2016). A combination of these factors and increasing competition adds to women's interest in these treatments.

The American Plastic Surgeons' report in 2015 ranks breast enhancements as the most common, followed by liposuction, nose reshaping, eyelid surgery, and tummy tucks (American Society of Plastic Surgeons, 2016). While some of these procedures may seem frivolous or even vain, the bottom line is that cosmetic surgery—even minor enhancements—can have a major effect on individuals' well-being, self-esteem, and quality of life (Delinsky, 2005). One positive outcome is that the results often enhance the patients' body image and confidence (Honigman, Phillips, & Castle, 2004).

2.1.2. Cosmetic dentistry

Sanders and Spencer (2005) found that half of all adults are not satisfied with their teeth and are unwilling to pay for expensive facial surgery. Thus, cosmetic dentistry presents an affordable, attractive alternative to facial surgery. This has led to an increase in demand for cosmetic dental procedures (Herrick, 2007). A recent survey by the American Academy of Cosmetic Dentistry (AACD) (2015) conducted between September and November of 2015 indicated that revenue from cosmetic dentistry procedures showed a four-point increase (i.e., from United States (US) \$500,000 to more than \$1 million) compared to 2013.

Cosmetic dentistry is growing because of the new emphasis on esthetic smiles (AACD, 2015). Whitening and/or bleaching is the most common procedure, while veneers, tooth-colored inlays, tooth-colored crowns, and dental bonding are also among the top five procedures (AACD, 2015). In addition, many individuals have a heightened awareness of the link between oral health and overall health. These trends have influenced professionals to integrate dental care and cosmetic work. Thus, traveling abroad for cosmetic dentistry is a tendency that will continue to grow (Kim, 2013; Nicolaidis & Zigiariadis, 2011).

2.1.3. Medical tourism destinations

Medical care travelers have generally flowed from underdeveloped countries to advanced economies (Lunt et al., 2011). However, that pattern is currently reversing itself as patients in wealthy nations seek cost-effective treatments in emerging markets. This shift is the result of growing economic and political cooperation, which has promoted the international mobility of patients and healthcare professionals (Horowitz & Rosensweig, 2007; Kelley, 2013).

Medical tourism is becoming a prosperous business globally and, in particular, for some European, Asian, and South American countries (Wang, 2012). Many of these destinations offer more than just surgery. They feature packages that include enticing tourism opportunities (Crooks et al., 2010). Medical tourism has continued to grow in the following top 10 countries in terms of volume of care: Thailand, Hungary, India, Singapore, Malaysia, the Philippines, the US, Costa Rica, Brazil, and Mexico (Bristow & Yang, 2015; Deloitte, 2015). A number of these countries are developing strategies in medical tourism focusing on both

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