



Taking Off to Take it Off

**A Model for Medical Tourists to
Evaluate Bariatric Surgical Services
at JCI Hospitals in Latin America**

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Taking Off to Take it Off: Background

- 1 in 3 Americans is obese – 100 million people!
- 9 million Americans are morbidly obese
- In 2008, 220,000 morbidly obese Americans elected to have weight loss surgery
- Surgery may not be covered by insurance
- Increase in patients traveling overseas for bariatric surgery seeking lower cost options – no reliable numbers
- If the US is their market, how well are JCI hospitals marketing to potential US clients?
- How can a potential US client select a safe, affordable, high quality hospital?



Evaluating the Pitch



ASMBS American Society for Metabolic & Bariatric Surgery

www.ASMBS.com
JUNE 21st through JUNE 26th
at the GAYLORD TEXAN

<http://www.youtube.com/watch?v=ZnIr0-4mLs8>



Evaluating Surgical Options

- Why medical tourism for weight loss surgery?
 - More affordable than in US
 - Numerous surgical options
 - Duodenal switch
 - Gastric bypass
 - Gastric LAP Band
 - Sleeve Gastrectomy
 - Vertical banded Gastrectomy
 - Same or better quality of medical services – really?
- Why not medical tourism?
 - Complex continuum of care pre- and post-surgery
 - Extensive follow up including nutrition and counseling
 - No standards by which to make an intelligent decision about where to have services performed



Evaluating Services & Marketing Effectiveness

- Four factors to evaluate:
 1. Internationally accepted measure of quality of service
 2. Effectiveness of web site to provide essential information for informed decision
 3. Quality of care offered for bariatric surgery
 4. Price

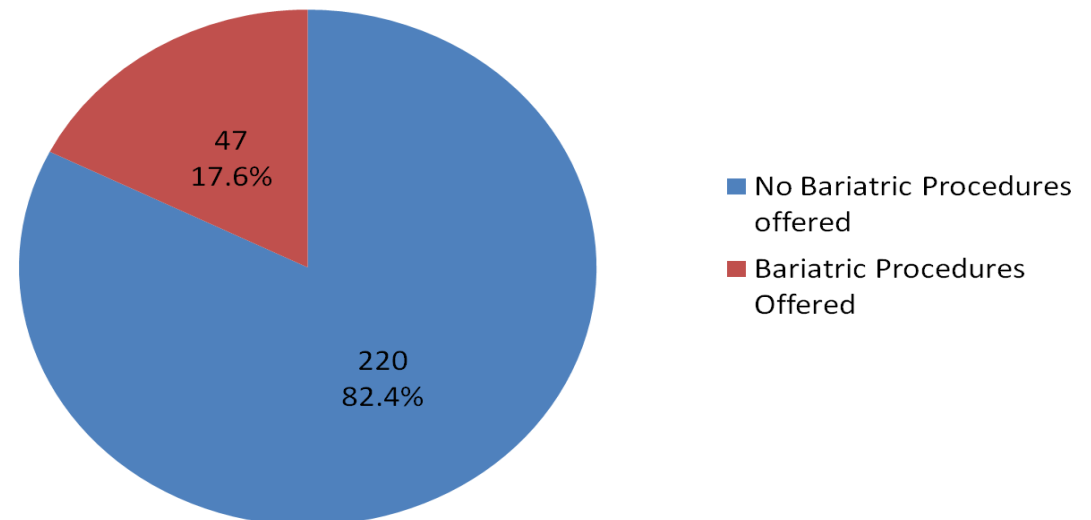




1. A Measure of Quality

- JCI accreditation as shorthand for quality
- Aggressively used as marketing tool
- 47 out of 267 JCI hospitals worldwide offer bariatric surgery
- Limited number to 13 hospitals in Central and South America that offer weight loss surgery

JCI Accredited Hospitals





1. JCI Hospitals in Central & South America

| Country | Hospital |
|-------------------|-----------------------------------------|
| <i>Brazil</i> | Hospital Alemao Oswaldo Cruz |
| | Hospital Israelita Albert Einstein |
| | Sociedade Hospital Samaritano |
| <i>Chile</i> | Clinicas Las Condes |
| <i>Colombia</i> | Fundacion Cardiovascular de Colombia |
| <i>Costa Rica</i> | Hospital CIMA, San Jose |
| | Hospital Clinica Biblica |
| | Hospital La Catolica |
| <i>Mexico</i> | American British Cowdray Medical Center |
| | Christus Muguerza Alta Especialidad |
| | Hospital CIMA, Monterrey |
| | Hospital San Jose Tec de Monterrey |
| | Hospital Y Clinica OCA S.A. de C.V. |

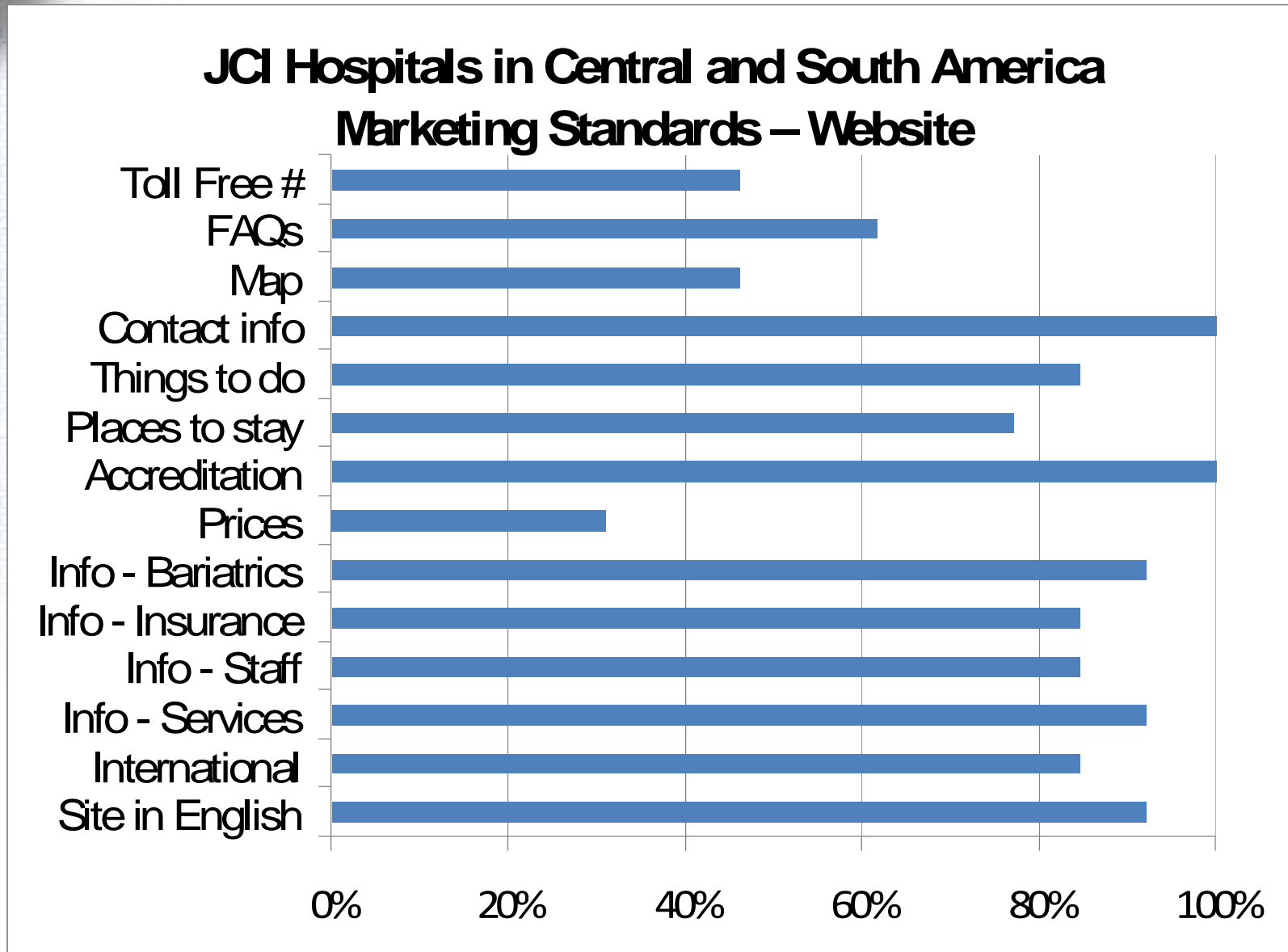


2. Evaluating Web Sites: 15 Factors

1. English or English translation available
2. Quality of English
3. Link to international patient information
4. Info re: general medical services
5. Info re: medical staff qualifications
6. Insurance/payment options
7. Info: bariatric services
8. Prices
9. Awards/accreditations
10. Hotel/accommodations
11. Tourist activities
12. Contact information
13. Map with directions
14. FAQs
15. International toll free number



2. Web Sites: Findings





2. Web Sites: Findings

- 11 out of 13 [85%] in English but quality of translation was mixed – 77% “excellent” or “very good”; 23% “good” or “poor”
- More than 80% had basic key information available – services, staff, insurance
- 100% - JCI accreditation and contact info
- Less than 80% - Toll free #, FAQs, map, places to stay – easy fixes
- Price – lowest, 4 out of 13



3. Evaluating Quality of Bariatric Services

- Going beyond JCI accreditation
- “Center of Excellence” standards utilized by Surgical Review Corporation
 - Non-profit organization that sets standards for excellence in bariatric surgery
 - Accredits hospitals and clinics
 - Accepted those standards for our research





3. Evaluating Bariatric Services: 11 Factors

- Regular in-service CME
- Hospital: 125 cases/yr
- Surgeon: 50 cases/yr
- Medical Director for bariatric surgery
- Consultation services for medical complications
- Equipment/instruments for bariatric patients
- Surgeons Board Certified in home country
- Established clinical pathways
- Designated support staff
- Support groups in place
- Post-surgery monitoring or tracking



3. Quality of Bariatric Services: Findings

- 1 of the 13 hospitals is SRC “Center of Excellence” – Hospital Alemao Oswaldo Cruz
- It was a challenge to find this information
 - No central location on web site
 - Communication was difficult and frustrating
 - Lack of information in English
 - Lack of response to emails and telephone calls
 - Results were classified as “Yes” or “No/Unknown”
 - Disappointing amount of “unknowns”



3. Quality of Bariatric Services: Findings

| SRC Quality of Care Factors | Yes | No/Unknown |
|------------------------------------|------------|-------------------|
| 1. CME offered | 62% | 38% |
| 2. Cases/Hospital | 31% | 69% |
| 3. Cases/Surgeon | 23% | 77% |
| 4. Medical Director | 77% | 23% |
| 5. Medical Complications | 92% | 8% |
| 6. Equipment | 92% | 8% |
| 7. Board Certified | 85% | 15% |
| 8. Clinical Pathways | 92% | 8% |
| 9. Support Staff | 92% | 8% |
| 10. Support Group | 54% | 46% |
| 11. Tracking | 46% | 54% |



4. Price: Is it cheaper?

- Average price for gastric bypass procedure in the US: \$18,000 to \$35,000
- Average price for Gastric Lap Band procedure in the US: \$17,000 to \$30,000
- For medical tourist, cost of procedure plus transportation, hotel, food for patient and companion
- Cost of follow-up care in or out of country



4. Price: Findings

- 4 out of 13 hospitals (31%) provided price or price range on web site
- Prices listed for various surgeries ranged from \$7,000 to \$12,000
- Prices may be a package or hospital services only
- Others (9) hospitals recommended calling for prices but...
- Communications are difficult
- Questionable claims – “Save up to 300%”
- Troubling marketing techniques – discounts and incentives
 - “2 for 1” specials
 - “Free facial with surgery”
- Trivialize seriousness of surgery



Research Conclusions

- Hospitals offer a competitive array of bariatric surgical procedures at competitive prices – so what if they can't communicate the information?
- Communication was the single most problematic issue
 - Broken web site links
 - No responses to email, phone calls – even in Spanish
 - Connected to telephone operators who did not speak English – false representations!
 - Web sites not in English, limited English, poor English



Research Conclusions

- Normal distribution of quality. Two hospitals set the bar for competitors: Hospital Oswaldo Cruz (Brazil) and Clinica Biblica (Costa Rica)
- Marketing gimmicks are misplaced
- Bold and possibly misleading statements about what hospitals can deliver
 - Undermines credibility and confidence
 - Understates the seriousness of surgery
 - Possible basis for lawsuit if things go wrong



Next Steps: Areas for Improvement

- Difficult for international patient to assess quality of services to make informed decision – improve quality of communication via web, email, phone
- Lack of oversight regarding follow up care (support groups, medical testing and psychological counseling) creates increased risk & increased likelihood that results will not last
- Hospitals, surgical weight loss community, and accrediting organizations should set uniform standards for international patients
- Not clear if all 13 hospitals are targeting US market but if so, communications must be improved
- Big opportunities for improvement, big chances for patients to take without better information.



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