

Are 'Operation Vacations' Worth the Trip?

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Shortly after arriving in India, Ann Stoda got a pair of sandals that dramatically improved her wardrobe.

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Her husband Doug got a procedure that dramatically improved his life.

The couple from Wisconsin had never been on a commercial aircraft before. And they likely wouldn't have chosen Chennai as the endpoint for their maiden flight in 2006 had it not been for the moment years earlier when Doug wrenched his hip while climbing off the skidder he used for logging.

With three kids and no health insurance, Doug pushed through his hip pain for the next 12 years, eventually getting out of logging. The hip cartilage he damaged had degenerated to the point where "in the hip itself there was relatively no movement left," he says. "I had a fairly significant limp and ended up working with Ann for a cleaning company...and with the pain, got tired out working 10-hour stretches."

In late 2005 it was clear to Doug that he had to do something about the nearly unbearable bone-on-bone arthritis in his hip. One option, he knew, was a hip replacement, not an appealing prospect for a man barely past 50. Potentially less debilitating was a procedure called hip resurfacing, which involves inserting cobalt steel onto the femur and into the hip socket lining without damaging the hip bone. The problem with the resurfacing was that it would have cost the Stodas \$55,000 they didn't have.

But it so happened that around that time a chiropractor clued Doug in about a news story she had seen on medical tourism. Ann went online and researched the report, the gist of which was that Doug could have his hip resurfaced in India for a lot less by a doctor who had been doing the procedure for a lot longer than U.S.-based surgeons.

The Stodas took out a second mortgage against their home and got a loan. Their eventual cost for the India trip, including surgery, air travel, and lodging was \$11,500.

"I went to India for surgery and my wife went to India for a vacation," jokes Doug, who the day after the surgery was already beginning physical therapy to strengthen the atrophied muscles around his hip. But his bone-on-bone hip pain was gone. After six days in the hospital, he spent two weeks continuing physical therapy at a luxury resort in India that would have cost them far more, Ann notes, had it not been for the rates negotiated by the hospital that had performed the surgery. The hospital, she adds, helpfully arranged everything but their airfare as part of their package.

Until I began hearing stories like the Stodas', I assumed medical tourism largely involved socialites who quietly slipped out of the country and came back from Rio with deep tans and new noses. While these travelers are out there, they're not driving the trend. According to the Center for Disease Control and Prevention (CDC) 2010 Yellow Book, approximately half a million Americans headed overseas for medical care in 2006, seeking out surgical, reproductive, and dental procedures, among others, that cost less and in some cases may not be available or legal in the United States.

Know where to go.

If you're willing to globe trot for medical care, the savings can be "substantial, anywhere from 50 to 90 percent depending on the procedure, says Josef Woodman, president of Healthy Travel Media and author of "Patients Beyond Borders."

A root canal that costs \$600 in the United States, Woodman notes, might only run \$265 in Mexico, \$190 in Costa Rica, \$165 in Thailand, and \$120 in Hungary. A heart bypass, anywhere from \$70-\$133K in the U.S., might cost about \$22K in Thailand, around \$16K in Singapore, \$12K in Malaysia, and \$7K in India.

While you're crunching numbers and figuring out if surgery plus travel cost equals a bargain, Woodman says to bear in mind that the "fundamental premise behind a bargain in health care is that it has to be backed up by quality." Perhaps the most critical consideration in picking an overseas hospital or facility, he says, is ensuring it has Joint Commission International (JCI)accreditation, a solid indication that the facility measures up to the same standards as American hospitals.

Overall, Woodman says, "Malaysia is one of the best-kept secrets [for] the recession-sensitive patient." Aside from its relative bargain rates for

everything from bypass surgery and health screenings to tummy tucks, the country is, incidentally, a nice place to visit, with a good exchange rate and "many attractive packages offered by health travel agents for treatment, lodging, and post-treatment recreation," Woodman says.

If fertility and a laid-back Caribbean destination pack appeal, consider Barbados. "While opinions are mixed, some studies have shown a direct correlation between stress levels and in-vitro fertilization (IVF) success rates," Woodman says. "If that's true, the JCI-accredited Barbados Fertility Center certainly comes to mind."

Protect yourself.

Basing your choice of doctor "on a recommendation from a friend who has kind of gotten a good result is a very non-scientific way of choosing a surgical course," says Dr. Jon Turk, M.D., a New York-based facial plastic and reconstructive surgeon, adding that he's had patients come back from medical travels with "scars placed in the wrong area or poorly-done surgery." Investigate whether the surgeon is affiliated with a JCI-accredited hospital and, Turk says, ask the doctor if you can speak to one of his previous patients. If the surgeon can't produce someone, keep shopping. "What you think you're saving in money including the travel can end up as something that costs you dearly in the end," Turk says.

One thing you may not think of immediately is the compatibility of your new spare parts. "You need to make sure that the hospital is [using] standard parts that you can also get in the United States," Woodman says, should something go wrong with the parts installed by your overseas doctor. He advises checking both with "the in-country and at-home practitioners - whether it be for a new hip, a new heart, or new molars - to make sure the spare parts used are all compatible."

If you're considering a facility without JCI accreditation – though Woodman says that present day, if it's not accredited, you should ask yourself why – among the questions you should ask the facilities administrators is what happens if something goes awry with your procedure, says Michelle Bernier-Toth, Director of the Office of Overseas Citizens Services for the U.S. Department of State. "Some of the facilities don't have the capacity to do emergency services should something go wrong and you want to make sure the facility does or can get the individual to an emergency room," says Bernier-Toth.

Ann Stoda points out that when she was researching the particulars of Doug's operation, JCI -accreditation wasn't as widespread as it is today, and the India facility they ended up choosing was only accredited after they had been there. In lieu of that reassurance, she kept researching and "found information on hip resurfacing [and] on the company that made the prosthesis, and went on Web sites to catch up on the medical lingo," Ann says, adding that she looked up the doctor who would ultimately do Doug's surgery "and found conferences and symposia [where he had presented]," and searched for sources who she felt "didn't have a vested interest" in their recommendations of overseas doctors or facilities.

"Don't be afraid," Ann says of the potentially beneficial experience of traveling for medical care. "But make sure you do your homework."

Three years after his operation, Doug's resurfaced hip is holding up well as he continues to rediscover such pleasures as riding a bike and tying his own shoes. Speaking of which, Ann's sandals are holding up well, too.

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