

EVALUATION REPORT ON MEDICAL TOURISM IN TURKEY 2013



REPUBLIC OF TURKEY MINISTRY OF HEALTH
DIRECTORATE GENERAL OF HEALTH SERVICES
DEPARTMENT OF HEALTH TOURISM

EVALUATION REPORT ON MEDICAL TOURISM IN TURKEY 2013

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Republic of Turkey
Ministry of Health

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LIST OF ABBREVIATIONS

JCI: Joint Commission International
SDP: Health Transformation Program
SGK: Social Security Institution
STK: Non-Governmental Organization
YHKS: Foreign Patient Registration System

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We have undergone a significant modification and transformation in the last 10 years through Health Transformation Program.

In this context, we have started to offer better healthcare services than many European countries do thanks to our private and university hospitals as well as public healthcare organizations, qualified manpower, specialized physicians, technological infrastructure and experiences.

With the Health Transformation Program, we have made our country an attraction center in terms of health in this region. Our country which sent patients to abroad before has become a country that admits patients from many countries including peripheral countries in particular and provides healing.

Providing high-quality, effective and efficient services for our people; our health system also admits about 300 thousand international patients for treatment purposes every year. With city hospitals and healthcare free zones started to be built, we plan to bring our country to a leading position in medical tourism.

Medical tourism is a new concept and working area for Turkey like the whole world and has started to become a remarkable export item bringing foreign currencies to our country. Medical tourism attracting the attention of all stakeholders of the sector in spite of having a short background offers new opportunities for Turkey. We regard the keeping the interest of academic and public and private sectors alive as a significant step considering the evaluation of these opportunities and what they can bring to the country's economy. We aim to increase and develop the share of healthcare services provided by the healthcare organizations of our country in the global medical tourism movement by cooperating with government organizations, non-governmental organizations, intermediary firms and all the organizations to play a role in development of medical tourism and by ensuring coordination between them to achieve a success.

This study performed based on the data obtained by the relevant units of our Ministry presents important information for the purpose of enlightening and directing the future of medical tourism in Turkey. I wish this study providing a general summary and analysis of the medical tourism in our country quantitatively will be useful for all stakeholders and thank all my work friends who have contributed to this study.

Dr. Mehmet MÜEZZİNOĞLU
Minister of Health



FOREWORD



PREFACE

In our country; medical tourism has started to develop rapidly in parallel with the Health Transformation Program. Today, our private and public hospitals offer high-quality services that can compete with the West. Many hospitals render services with high technology and qualified manpower. The healthcare organizations in our country and especially in Ankara, Istanbul, Antalya, Izmir, Muğla, Kocaeli and Adana, etc. accept and treat a great number of foreign patients from abroad. Private health sector has rapidly improved in recent years and well-equipped facilities with high technology have been opened. Approximately 50 healthcare organizations of us have international accreditation. Almost 300.000 international patients are treated at the hospitals of our country every year.

In parallel with the “Health Transformation Program” initiated by the Ministry of Health, our high quality, specialized, rapid and economic healthcare services have exceeded our borders and become attractive for physicians and patients in different countries and begun to be offered for all the patients on earth. Especially private health sector plays an important role in medical tourism. While 91% of medical tourism services are offered by private health sector, 9% of them are provided by public hospitals. Considering the results and processes in this study, we see that medical tourism in our country has been rapidly developing. We, as the Ministry of Health, continue to make efforts for making all kinds of necessary infrastructure and legislative works suitable for this developing structure. With the “Health Transformation Program”, we will carry Turkey to success in medical tourism by offering the most excellent and economical health care services for both our people and patients from all over the world.

Our Ministry has started to keep the records of health care services offered for foreign patients on a regular basis. Medical tourism was widely involved in the 10th development plan of our country. Furthermore, it was discussed as one of the important objectives in the strategic action plan 2013-2017 of our Ministry. In 2023, it is aimed to achieve 2 million foreign patients and a foreign currency inflow of 20 billion USD.

I thank all the friends and Hacettepe University who have made their best efforts in this study.

Prof. Dr. Nihat TOSUN
Undersecretary

This study introducing the development of medical tourism we believe to have a huge potential in the world will be very useful for establishing the strategic policies of medical tourism in Turkey. Considering the potential and progress of “medical tourism” regarded as the sub branch of health tourism in the world, it is thought that a significant global competitive environment will be experienced in future. Accordingly, the clinics which health tourists coming to Turkey prefer for treatment purposes, ratios of these clinics among the total and what countries mostly prefer Turkey are discussed in this study. The roles of public sector and private sector in medical tourism sector are also analyzed.

Considering the data obtained from this study, we will emphasize that the public sector needs new initiatives in health tourism while aiming to present a picture of Turkey regarding health tourism and health care services offered for international patients. Within the frame of City Hospitals Project to be formed by the Ministry of Health in some cities, when gigantic healthcare campuses come into action, the public’s duty in presentation of healthcare services will be further intensified with regard to health tourism. The fact that the public hospitals provide health care services for international patients will positively affect private hospitals in the long term especially for advertisement of the health tourism.

In this study, we discuss international patients under four different categories. We regard the patients coming for treatment purposes as medical tourists, those coming to our country for tourism purposes but having to receive health care services during their holiday as tourist health, those coming from countries having bilateral agreements on health as the patients receiving services under the bilateral agreement and those coming from countries having bilateral agreements with Social Security Institution (SGK) as international patients receiving services under SGK. Thus, the analysis of presenting health care services for foreigners can be made in more detail. Detailed analyses are made by city, country, clinic, type of hospital, month, accreditation status of hospitals and health tourism income. Patient records are made based on the registration system we have newly created and we had better to state that the polyclinic patients presented at the hotels in tourism regions have not been registered at all. We hope to improve the international patient registration system and to achieve better results in the following years.

In our country, about 300.000 international patients are treated at public and private health care organizations every year. Medical tourists coming to our country mostly prefer the branches of Eye Diseases, Orthopedics and Traumatology, Internal Diseases, Ear, Nose and Throat, Diseases and Gynecological Diseases and Obstetrical Diseases and General Surgery Clinics and Oncology. The



EXECUTIVE SUMMARY

fact that the patient waiting period is too long in Western countries, that health care services are so expensive and that the insurance coverage starts to reduce has carried Turkey to a desirable and advantageous position. We are ahead of many of our neighbors located in Africa and in the east in terms of high-quality healthcare services, qualified manpower and high technology. For these reasons, a great number of patients come to our country from the said nearby geography for treatment purposes.

No records for tracking professional health tourists coming to Turkey have been kept so far. Our General Directorate, Health Tourism Department will carefully start the recording and statistical works as of 2013 and make analyses with the data to be obtained. In this study, only medical tourism is evaluated. The statistics of thermal tourism and elderly tourism are not included in this study. This study is based on international patients who received health care services in our country in 2012 and will be updated every year and published as an annual medical tourism report.

I thank Dr. Dursun AYDIN, Dr. Ümit ATEŞKAN from the Health Tourism Department under our General Directorate providing full support in gathering data for this study, English Translator Sultan AÇIKALIN following the foreigner records and Academicians of Hacettepe University which analyze the data.

Prof. Dr. İrfan ŞENCAN
General Manager

PREFACE BY RESEARCH TEAM

Turkey has become the world's one of the most interesting countries in tourism recently. According to the 2012 ranking of top 10 countries attracting the highest number of tourists and having the most tourism incomes, Turkey is in the 6th place in terms of the number of tourists and in the 12th place in terms of tourism incomes. With this strong tourism potential, Turkey is among the countries that become prominent in health tourism. A great number of people in the world visit different countries for treatment purposes to receive more reasonable and higher quality health care services since the health care services having high technology are very few or nonexistent in their countries, some health care services are much more expensive and there is no sufficient manpower in their countries. Visiting different countries for treatment purposes has introduced medical tourism as an alternative tourism movement. Medical tourism can be defined as an act of travelling from where the patient is domiciled to another place in order to benefit from treatment applications performed by physicians at second and third stage-health care organizations and institutions.

In this study, the medical tourism in Turkey is evaluated under the title of health tourism. All patients coming from abroad and going to the hospitals in Turkey are defined as "international patients". Out of these patients, those coming for treatment purposes are regarded as "medical tourists", those coming to our country for tourism purposes but having to receive health care services during their holiday as tourist health, those coming from countries having bilateral agreements on health as the patients receiving services under the bilateral agreement and those coming from countries having bilateral agreements with Social Security Institution (SGK) as international patients receiving services under SGK.

In recent years, medical tourism has been a rapidly rising sector in the world and Turkey is one of the leading countries in this sector. As presented in this report, the number of international patients coming to Turkey increases each passing year. Especially after 2010, this increase gained big acceleration. While the number of international patients coming to Turkey was 156.176 in 2011, this number rose up to 261.999 by the end of 2012 (See Graphic 1). 169.462 out of 261.999 international patients go to hospitals as medical tourists. International patients mostly come from Germany, Libya and Russia (See Table 29); medical tourists from Libya, Germany and Iraq (See Graphic 25). Majority of patients coming for treatment purposes prefer Istanbul, Antalya and Ankara (See Table 13 and Graphic 11) and especially Eye Diseases, Orthopedics and Traumatology and Internal Diseases clinics. (See Graphic 16).

Turkey aims to be the leading country of the world in health tourism by targeting to provide healthcare services for 1 billion people with large and well-equipped hospitals that can compete with European standards, geographical position, Health Transformation Project and developments in tourism. Accordingly, the health tourism in Turkey is of great importance and the economic value it will bring is quite high. Particularly private hospitals made serious moves in health tourism and rendered service to 83% of all international patients, 91% of medical tourists and 68% of patients under tourist health in Turkey, 2012.

Being conscious of the significance of health tourism and economic contributions to our country, important steps should be taken for development in this area. Accordingly, increasing the advertisement of health tourism should be included in the

goals of 2023 set for health tourism. Increasing the number of physicians and other health care personnel and improving the education of them in order to offer better and higher quality service under health tourism are among major goals. Education of translators is of great importance to understand the patients correctly and provide correct services for these patients. Furthermore, necessary works should be performed to raise the quality of health care services and to ensure its sustainability.

In the strategic action plan 2013-2017 of the Ministry of Health, it is aimed to continue the collaboration of Turkey with other countries and international organizations in the field of health and to make Turkey an attraction center and to increase the presentation capacity of cross-border health care services through the health vision and government program for the year 2023. The strategies intended for strengthening the current collaboration with other countries, national/ international organizations in development of health policies are; to qualitatively and quantitatively improve the projects carried out with international organizations, to make new bilateral cooperation agreements/ protocols in the field of health and to increase our effectiveness in international organizations and to carry out common projects and programs intended for third countries and to perform training research works for those coming to our country in accordance with the agreements and protocols. The strategies developed for the purpose of making Turkey an attraction center in presentation of health care services are; to cooperate with the sector and Non-Governmental Organizations (NGOs) in health tourism, to determine the criteria for the facilities carrying out and to carry out health tourism activities and to supervise the and to support the overseas health tourism activities of the public-private sector in the regions having thermal-spa tourism, to support the overseas health tourism activities of the public-private sector in medical tourism and to continue working to minimize the problems likely to occur in patient admittance and during treatment. The strategies intended for developing region-based, multi-dimensional and multi-stakeholder bilateral relations are; to plan new activities for technical and humanitarian aid purposes for various countries, to improve ongoing activities, to establish and operate health units abroad on a temporarily basis, to develop health system support programs and to share them with the countries which we make bilateral cooperation with, to develop common production models/ collaborations for third countries together with developed countries, to include the NGOs and private sector organizations in our country in bilateral relations more actively, to contribute to the development of human resources of the countries with which we have bilateral relations, to organize promotional activities abroad with the organizations providing health care services and to continue developing cooperation with the countries having a commercial potential.

In the light of this information, this research presenting the current status of Turkey in health tourism has been performed in cooperation with the Ministry of Health General Directorate of Health Care Services Department of Health Tourism, and Department of Health Administration- Faculty of Economics and Administrative Sciences of Hacettepe University. We wish that this study will lead further studies to be performed afterwards.

Research Team

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1. INTRODUCTION

Production and consumption of health care services and in this context, mobilization of patients at an international level is a matter of fact which has always existed throughout history. However, this mobilization has further increased especially in recent years with the globalization mainly based on information and communication technology and a serious market that focuses on health tourism has been created. Some countries including Turkey have been making serious attempts for the last 15-20 years to get a slice of this growing cake of patient cycles.

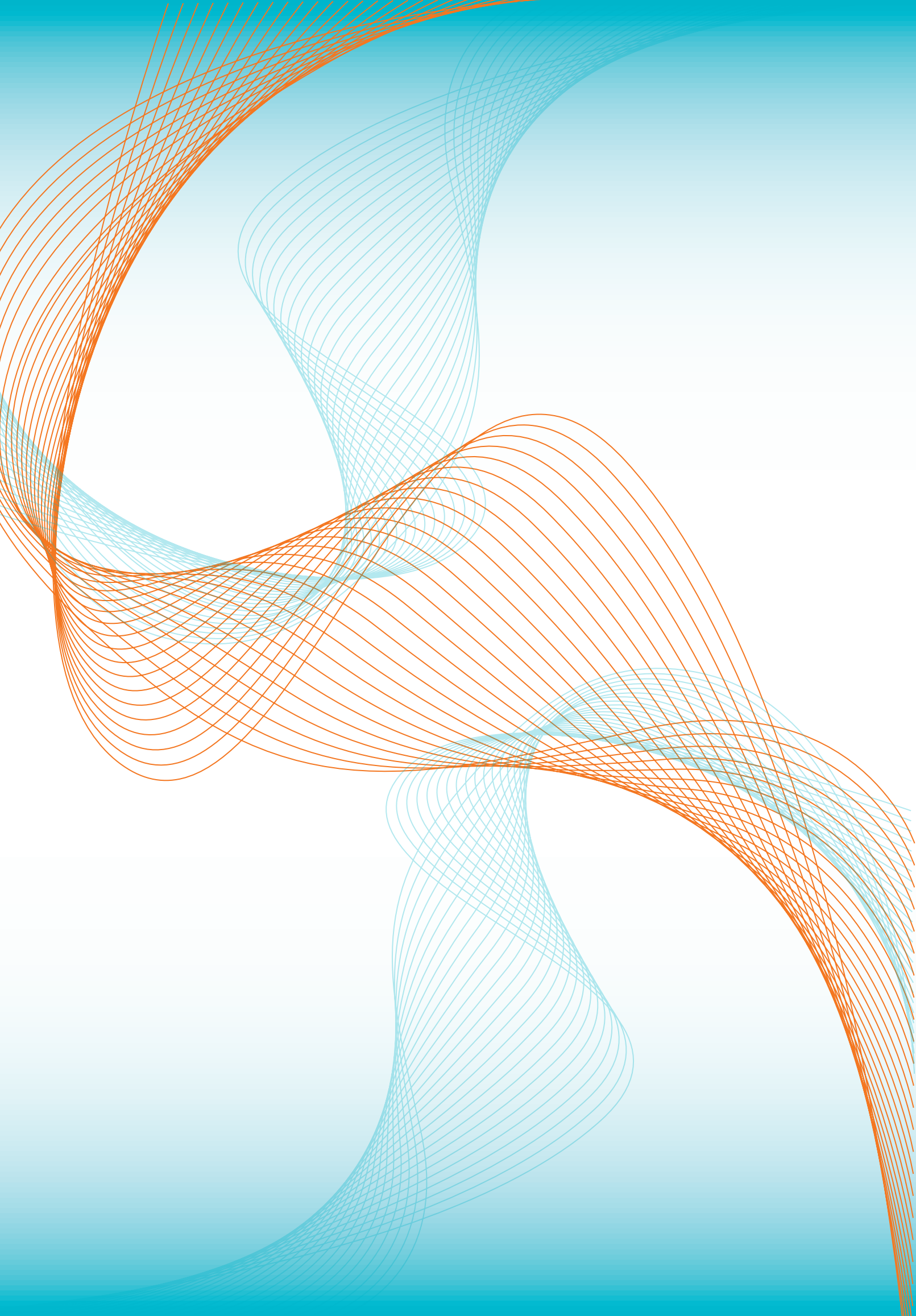
Turkey has made significant developments and improvements in every component of health care services through the Health Transformation Program (HTP), has improved the health of society and reached a corporate capacity that allows providing high-quality and cost efficient service for not only national patients but also international patients since 2003. In this context, Turkey has become a destination that gets a remarkable share of these international patient cycles in recent years.

The purpose of this study is to analyze and report international patients receiving health care services in Turkey in terms of countries, cities, months, hospitals, clinics, etc., in this context, to present the current status of Turkey in medical tourism and to make suggestions that will lead the policies to be created concerning medical tourism.

The data used in this study; has been obtained from the data which were entered by all the hospitals situated in 81 cities into the web-based registration system called “Foreign Patient Tracking System” of the Ministry of Health, General directorate of Health Care Services. Between the dates of 01.01.2012-31.12.2012. The data obtained has been analyzed and reported in accordance with the purpose of this study. The analyses and reporting are based on the concept of “international patient”. With this concept, international patients are evaluated under four main subcomponents which are;

- 1) patients under medical tourism (medical tourist),
- 2) patients under tourist health,
- 3) patients receiving service under bilateral agreements on health and
- 4) patients receiving service under the agreements with Social Security Institution.

The study consists of four main parts in the framework of this purpose and scope. First, information about medical tourism in Turkey; and then information about international health care services and the concept of international patient will be discussed. Later, the medical tourism in Turkey will be further detailed in the context of “international patient” with the figures obtained from the data of 2012. Finally, conclusions and recommendations will be handled.



2. MEDICAL TOURISM IN TURKEY

Before briefly setting forth the medical tourism in Turkey, we had better to present general concepts about health tourism.

2.1. Health Tourism

2.1.1. Definitions of Health Tourism and Health Tourist

However there are a wide variety of definitions about what the concept of health tourism refers to, it can be specified that the said definitions include some common aspects such as purpose of travel and period of travel. Accordingly, a definition of health tourism that will light the way for our study can be made as follows. *Health tourism* refers to travelling from the place of residence to another place for the purpose of protection and development of health and treatment of diseases, and benefiting from health and tourism opportunities by staying at the place of destination for minimum 24 hours. A person who travels for the aforementioned purposes is called “health tourist”.

2.1.2. Types of Health Tourism

Considering the types of health tourism; it is seen that it is classified under four groups including medical tourism, thermal/SPA/wellness tourism, elderly tourism and disabled tourism.

Medical tourism: Medical tourism involves medical proceedings or activities performed to develop the wellness of medical tourist. Healing a disease covers; medical check-up, health screening, dentistry, heart surgery, prosthetic fitting, cancer treatment, neurosurgery, transplantation and other processes requiring qualified medical interventions (Aydın, Constantinides, Mike, Yılmaz, Genç and Lanyi 2012).

Thermal/SPA/wellness tourism: While the types of tourism highly vary by purpose, demand and pleasures and hobbies of people and flourish with innovations in different areas, keeping fit has become a lifestyle and modern people caring about their inner and outer beauty start to get service through health tourism. It is possible to group the derivatives of thermal tourism under three main titles: 1) climatizm (benefiting from fresh air), 2) thermalizm (thermal springs) and 3) uvalizm (treatment with fruit and vegetable cures) (Aydın, Constantinides, Mike, Yılmaz, Genç ve Lanyi 2012). The scope of this report is related to “medical tourism”.

Elderly Tourism: In the last period, the facilities which have been established with regard to the nursing of the elder in health tourism and the trips with this purpose have taken place in the tourism activities as a new form of the health tourism. According to the data of the Turkish Statistical Institute on 31st December 2011; while those who are under 29 form the half of the population of Turkey (74.724.269), the number of those who are 65 and over has reached 6 million, which is a considerable amount. If we add those who are included in the 50-64 age group which is the advanced elder category and about 9,5 million, we come up with a huge number about 5,5 million (50 years and over). (Aydın, Constantinides, Mike, Yılmaz, Genç and Lanyi 2012).

Disabled tourism: Special care for the disabled is provided at clinic hotels and rehabilitation centers.

2.1.3. Development of Health Tourism and Reasons

Since human beings existed, international patient cycles have always been in question. Generally the rich segment in the developing countries visited the developed countries for treatment methods not available in their own countries and/or higher quality healthcare services and benefited from health care facilities having better service opportunities in the later twentieth century. However, in the twenty-first century, the direction of international patient cycles has started to change. The people living in the developed countries now visit developing countries for more reasonable and higher quality services.

It is seen that a wide range of factors are influential in development of health tourism. They can be specified as; globalization on earth, rapid developments in information-communication technologies, problems with the health systems in countries, consumers becoming conscious, new market searches of sectors and product diversification and European Union (EU) dynamics. (Yıldırım and Altunkaya2006).

2.1.4. Featured Destinations in Health Tourism

On a global scale, it is observed that some countries have become more prominent as health tourism destinations in the last 10-15years. The most prominent countries include; Turkey, USA, India, Singapore, Malaysia, South Korea, Thailand, Hungary, Brazil, Argentina, South Africa, Cuba, Mexico, Germany, Italy, France, Poland, Spain, Greece and United Arab Emirates.

2.2. Medical Tourism in Turkey

Generally health tourism and especially medical tourism in Turkey have started to rapidly develop in parallel with positive developments in tourism in the last 10-15 years.

It is observed that there is an increase in tourism movements worldwide. According to the data of the World Tourism Organization/WTO, while the number of tourists in 2010 was 980million, this number exceeded 1 billion in 2011 by an annual average increase of 3.5%. Turkey ranked number 7 with 27 million tourists in 2010 among the world's tourism destinations; it rose up to the rank 6, which was the succeeding rank, in2011with 29million tourists (Table1). However, Turkey cannot take place among the first 10 countries considering the returns from these tourist movements (UNWTO 2012).

Table 1. World Tourism Destinations

Countries	Million Tourist		Change (%)
	2010	2011	2011/2010
1. France	77,1	79,5	3,0
2. USA	59,8	62,3	4,2
3. China	55,7	57,6	3,4
4. Spain	52,7	56,7	7,6
5. Italy	43,6	46,1	5,7
6. Turkey	27,0	29,3	8,7
7. England	28,3	29,2	3,2
8. Germany	26,9	28,4	5,5
9. Malaysia	24,6	24,7	0,6
10. Mexico	23,3	23,4	0,5

Source: UNWTO (2012)

One of the reasons that direct people to international tourism movements is “health” undoubtedly. It will be correct to say that the worldwide tourism movements for health purposes are in parallel with the aforementioned growth. It is stated that the size of health tourism cake in 2010was 100 billion dollars. This expenditure was made by about 22 million health tourists. Considering the worldwide potential and progress of medical tourism evaluated as a sub branch of health tourism, it is thought that a significant global competitive environment will be created in future (Aydın, Aypek, Aydın, Şahbaz and Arslan 2011).

Turkey, having a considerable share in the worldwide tourism movements, (Aydın, Aypek, Aydın, Şahbaz and Arslan 2011);is gaining more shares in medical tourism each passing day with high quality tourism management and Turkish hospitality known worldwide in combination with its infrastructure facilities, high quality health care services, qualified manpower, competitive price advantages, government support, matchless natural and historical resources and suitable climate conditions arising from its geographical position in particular (Yıldırım and Altunkaya2006).

According to the official data, while the number of international patients receiving health care services in Turkey in 2011 was 156.176, it rose up to 262.000 for the year 2012. This amounts to an increase of 68% approximately (Table3).

2.3. Health Tourism Strategy of Turkey

The Strategic Action Plan of the Ministry of Health for the years between 2013 and 2017 contains objectives and goals regarding health tourism (Table 2).

Table 2. Ministry of Health, Strategic Action Plan 2013-2017: Objectives and Goals for Health Tourism

OBJECTIVE4	Continue developing the health system as an instrument of contribution to Turkey's social and economic development and global health
GOAL4,5	Strengthening the health tourism in Turkey.
Strategies Intended for the Goal	
4.5.1.	Advertising and creating attraction regarding health tourism.
4.5.2.	Improving the quality of services offered under health tourism.
4.5.3.	Expanding the service scope of health tourism.
4.5.4.	Enhancing the management of health tourism.

2.4. Turkey's Tenth Development Plan 2014-2018:Health Tourism development Program

Purpose and Scope of the Program

Health tourism offers a substantial opportunity considering the potential of our country in parallel with the receiving of the treatment, utility of thermal springs, gradual increase of rehabilitation services and services that make people feel well and healthy.

With this program, it is aimed to raise the service quality in medical tourism, thermal tourism and elderly-disabled tourism areas in which Turkey has an ascending market position in the world, thus enhancing its competitive power.

Goals of the program

- Achieving a capacity of 100.000beds in thermal tourism
- Rendering service to 1.500.000 (600.000 of which for treatment purposes) foreign thermal tourists in thermal tourism
- Earning an income of 3 million dollars in thermal tourism
- Taking place among the first 5 destinations in thermal tourism
- Treating 750.000 medical foreign patients
- Earning an income of 5,6 million dollars in medical tourism
- Achieving a capacity of 10 thousand beds in elderly tourism
- Having 150.000foreign tourists in elderly tourism
- Earning an income of 750 million dollars in elderly tourism

Performance Indicators

- Bed capacity in thermal, medical and elderly tourism
- Number of tourists in thermal, medical and elderly tourism
- Tourism income in thermal, medical and elderly tourism
- Turkey's ranking in medical tourism in the world

Program Components

Component 1: Development of Corporate and Legal Infrastructure for Health Tourism

- Preparing a health tourism strategy and an action plan considering the target country, region and branches
- Developing coordination mechanisms between public institutions, strengthening the cooperation between public and private sectors
- Constituting a legislation infrastructure that allows for price differentiation
- Developing statistical infrastructure

Component 2: Improvement of Physical and Technical Infrastructure in Medical Tourism

- Preparing the inventories of thermal tourism assets and medical tourism infrastructure
- Increasing the possibility to use facilities such as hospitals, thermal hotels, elderly and disabled nursing centers, etc. in health tourism
- Providing support for investment and planning under health tourism, creating new models for land procurement

Component 3: Enhancement of Service Quality in Health Tourism

- Developing the personnel working in health tourism qualitatively and quantitatively
- Raising the service and facility standards for health tourism
- Developing facilitating mechanisms for accommodation and other assisted services

Component 4: Effective Advertising and Marketing in Health Tourism

- Increasing advertising and marketing operations in the target country and regions
- Increasing the collaborations of public and private sectors in advertising and marketing

Coordinators and Responsible Institutions/ Organizations

General Coordinators: Ministry of Health, Ministry of Culture and Tourism

Institution/Organization Responsible for Components

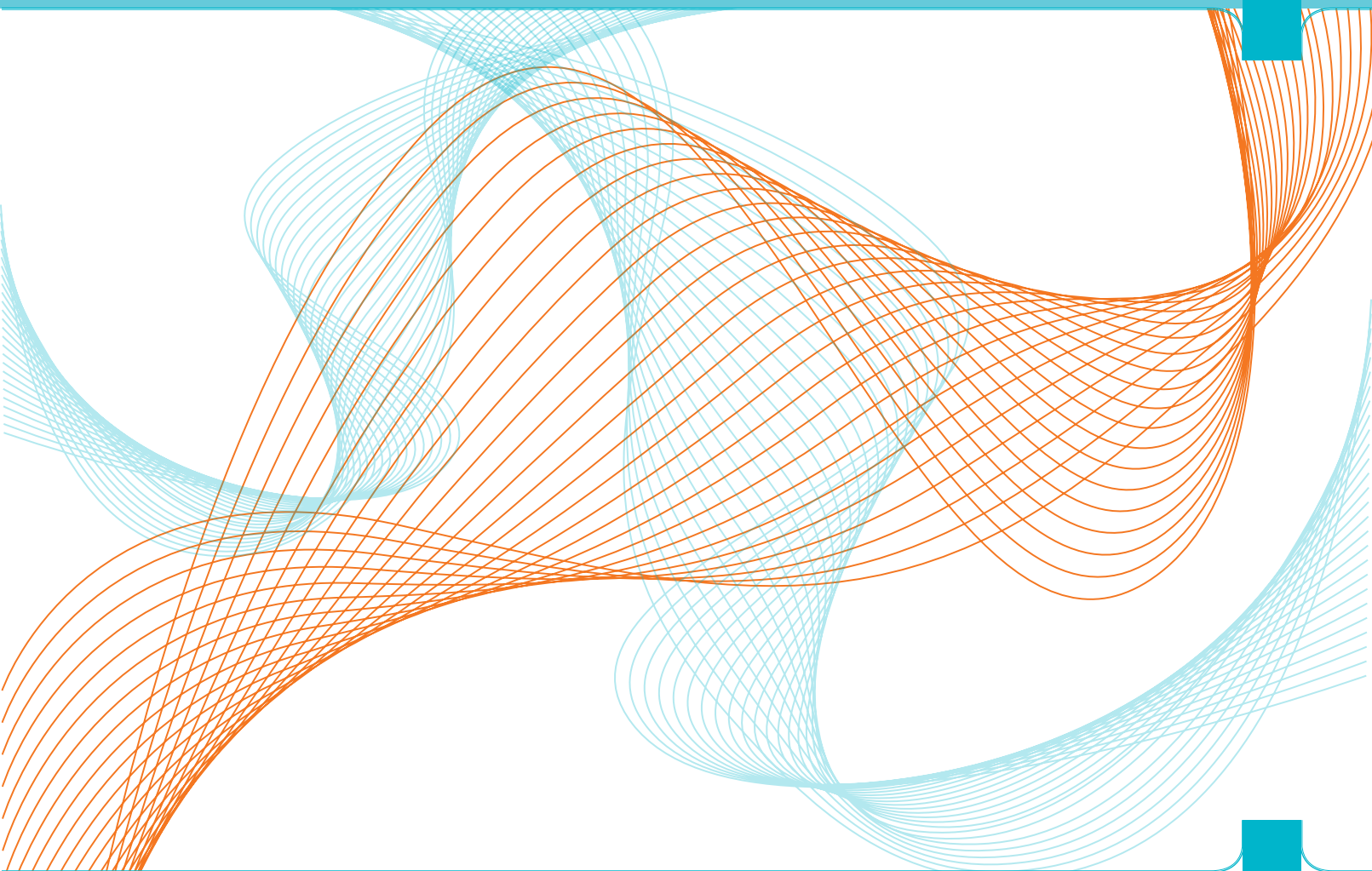
Component 1: Ministry of Health

Component 2: Ministry of Culture and Tourism

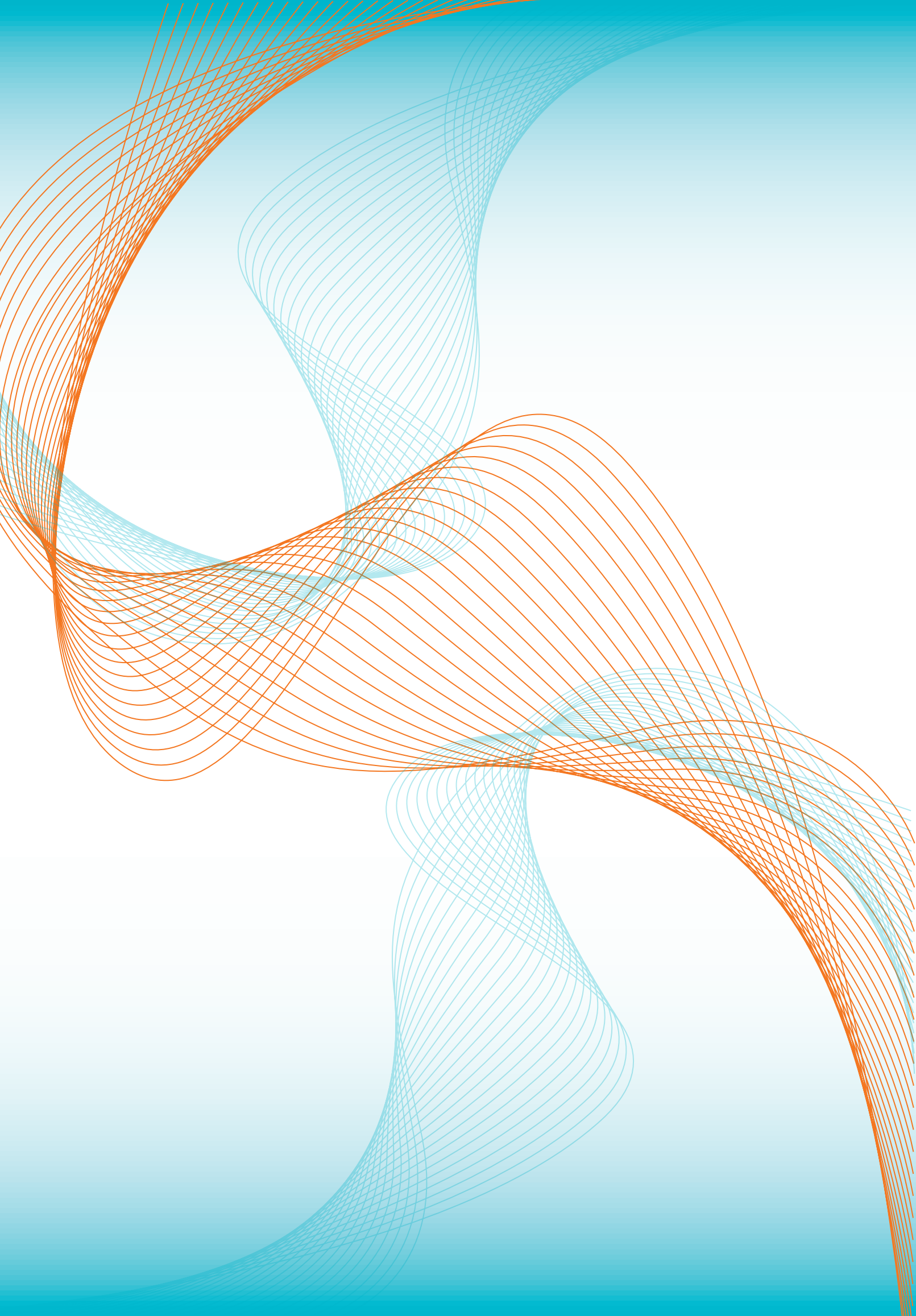
Component 3: Ministry of Health

Component 4: Ministry of Culture and Tourism

INTERNATIONAL HEALTH CARE SERVICES AND INTERNATIONAL PATIENT CONCEPT: A GENERAL FRAMEWORK



International Health Care Services and International Patient Concept
a General Framework International Health Care Services and International
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Health Care Services and International Patient Concept



3. INTERNATIONAL HEALTH CARE SERVICES AND INTERNATIONAL PATIENT CONCEPT: A GENERAL FRAMEWORK

3.1. International Health Care Services and International Patient Concept

Production and consumption of health care services and in this context, patient cycles at an international level is a matter of fact which has always existed throughout history. However, this cycle has further increased especially in recent years with the globalization mainly based on information and communication technology and a serious market that focuses on health tourism has been created.

International patient refers to a person who benefits from health care services while being in a country other than his/her home country or by going to another country instead of international patient; terms such as cross-border patient, cross-border health tourist, health tourist, tourist health etc. can be used in spite of differences in meaning. As specified in the introduction part, the concept of international patient covers;

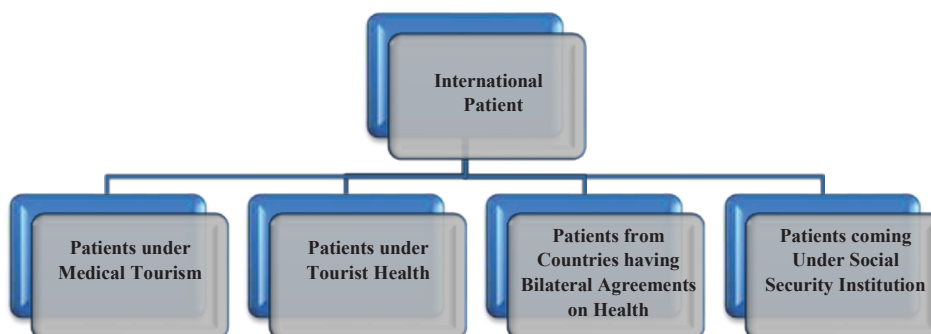
- 1) patients under medical tourism (medical tourist),
- 2) patients under tourist health,
- 3) patients receiving service under bilateral agreements on health and
- 4) patients receiving service under the agreement with Social Security Institution in the framework of this study.



3.1.1. International Patient Classification

International patient classification created considering the dynamics of Turkey is given in the Figure 1 and briefly defined below.

Figure 1. International Patient Classification



3.1.1.1. Patients Receiving Service under Medical Tourism: Medical Tourists

In addition to thermal/SPA/wellness tourism, elderly tourism and disabled tourism; *medical tourism* that is another subcomponent of health tourism can be defined as the patient's act of travelling from his place of domicile to another place in order to benefit from treatment applications made by second and third stage- health care

institutions and organizations in general. These applications under medical tourism mainly cover; medical check-up, health screening, dentistry, heart surgery, prosthetic fitting, cancer treatment, neurosurgery, transplantation and other processes requiring qualified medical interventions (Aydın, Constantinides, Mike, Yılmaz, Genç and Lanyi2012).One of the main components in the framework of the analysis we use in our report is medical tourism and medical tourist.

3.1.1.2. Patients Receiving Service under Tourist Health

Tourist health covers the influence of the environment where the tourist accommodates and visits in terms of health. Tourist health is generally the subject of environmental health. The fact that a tourist going from the place of domicile to another country for holiday has to receive urgent or unplanned health care services during this action is called tourist health (Aydın, Şeker and Şahan2011).In brief, tourist health refers to that the persons involved in the tourism activity for a purpose other than health benefit from health care services in the place which they visit as a tourist if they need during tourism movement.

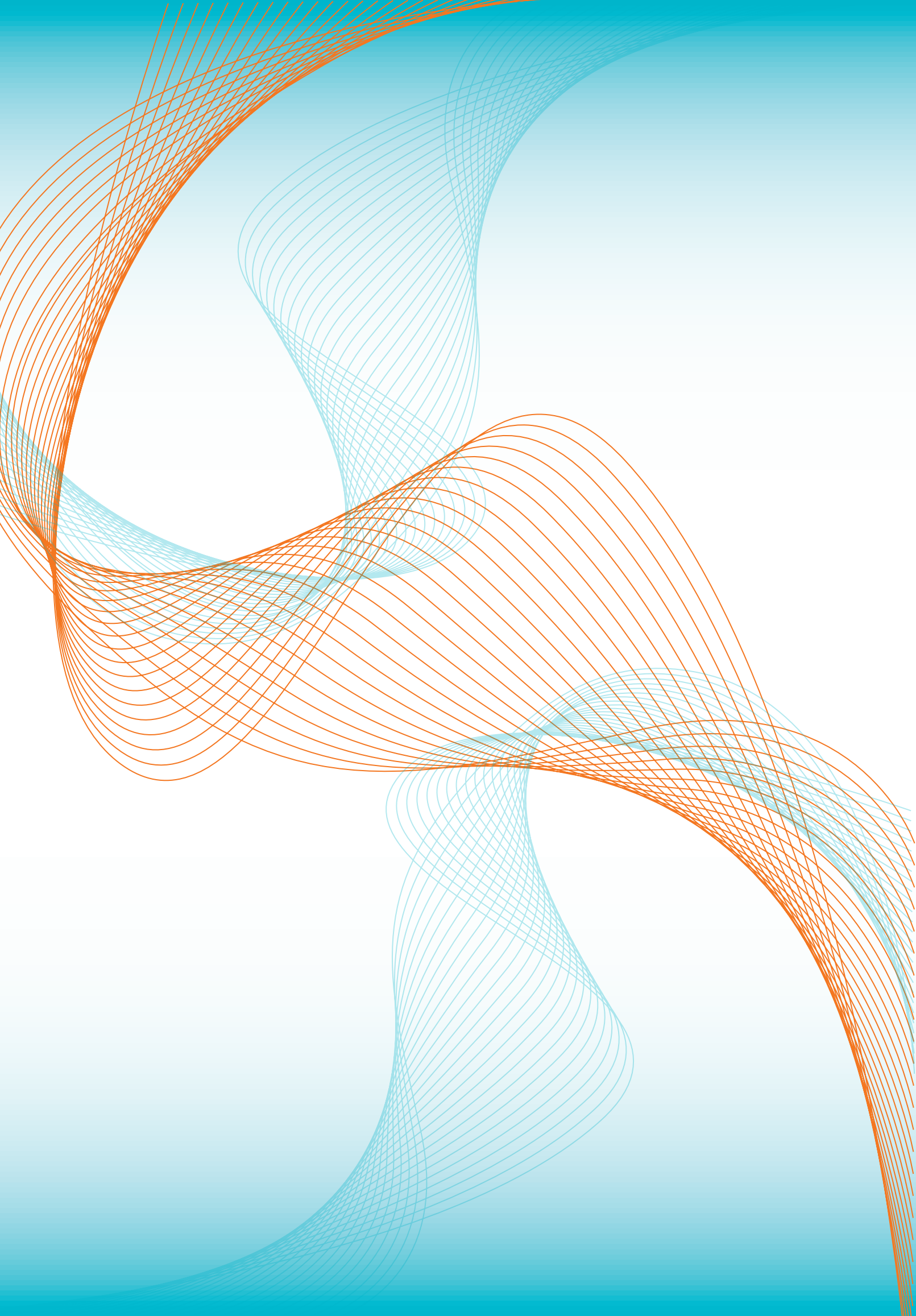
3.1.1.3. Patients Coming From Countries Having Bilateral Agreements on Health

An important area of application and mechanism of international relations is *International Bilateral Agreements on Health*. In this respect, T.R. Ministry of Health has bilateral agreements on health with various countries. A definite numbers of patients come to Turkey from these countries under the relevant protocol and treated by the Ministry of Health. These patients are sent to Public Hospitals or University Hospitals by an official letter from the General directorate. Turkey has bilateral agreements in this scope with Sudan, Afghanistan, Yemen, Albania, TRNC, Kosovo and Azerbaijan.

3.1.1.4. Patients Coming From Countries Having an Agreement with Social Security Institution

Countries may seek to benefit from the health care services of each other under *agreement between social security institutions*. In this context, Turkey may offer health care services for the citizens of the country having the right to receive health care services under the Social Security Agreements signed and its citizens residing abroad (diaspora/expat) when needed. The countries with which Turkey has signed Social security Agreements are as follows from the end of 2012: Germany, Austria, Holland, Belgium, France, TRNC, Macedonia, Romania, Albania, Bosnia Herzegovina, Czech Republic, Azerbaijan, Luxembourg and Croatia.

In this context, the treatment aids of international patients receiving health care services are primarily paid by the related Social security Institution. The Social Security Institution then collects these aids from the social security institutions of the persons pursuant to the terms and conditions of the agreement.



4. FINDINGS

4.1. General Findings

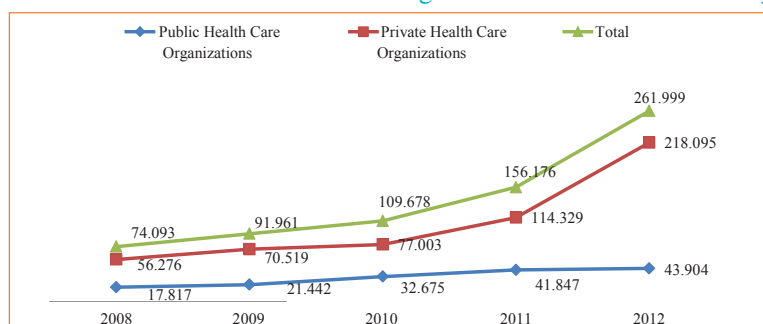
Table 3. Distribution of International Patients Receiving Health Care Services in Turkey by Years, 2012

Yillar	Public Health		Private Health Care		Total	
	Number	Percentage	Number	Percentage	Number	Percentage
2008	17.817	24,1	56.276	76,0	74.093	100,0
2009	21.442	23,3	70.519	76,7	91.961	100,0
2010	32.675	29,8	77.003	70,2	109.678	100,0
2011	41.847	26,8	114.329	73,2	156.176	100,0
2012	43.904	16,8	218.095	83,2	261.999	100,0

Table 3 gives the distribution of international patients receiving healthcare services by years. International patients; Medical Tourists, Patients Receiving Service under Tourist Health, Patients Coming From Countries Having Bilateral Agreements on Health and Patients Coming Under Social Security Institution.

While the number of patients coming to the Public Healthcare Organizations was 41.847 in 2011, this number reached 43.904 in 2012. As the number of patients coming to Private Healthcare Organizations was 114.329 in 2011, this number reached 218.09, which was double the previous year in 2012. Total number of international patients was 261.999 in 2012.

Graphic 1. Number of International Patients Receiving Health Care Services in Turkey by Year, 2012*

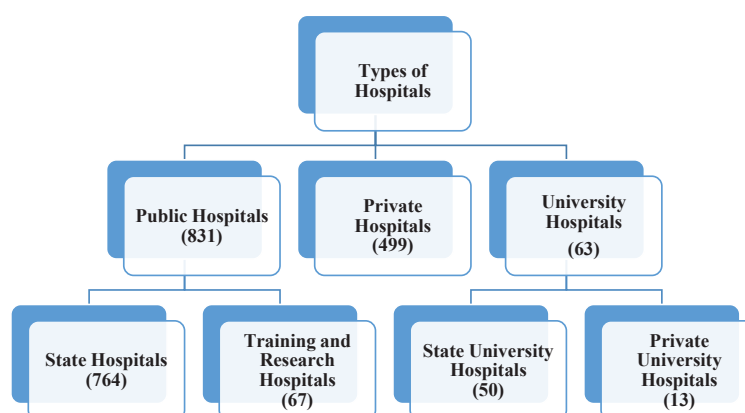


* The whole of university hospitals (state universities and private universities) are included in public health care organizations in order to make a comparison with the data presented in the previous reports.

As is seen in the Graphic 1, the number of patients receiving health care services in Turkey by years has been continuously increasing. Especially after 2010, a serious increase is seen. This trend sets forth the medical tourism potential of Turkey. Another trend required to be read from the graphic is that the increase in the number of international patients of the private sector as is quite higher than the public sector's.

4.2. Distribution of International Patients in Turkey by Hospital

Figure 2. Types of Hospitals in Turkey



Source: Ministry of Health. (2012). Health Tourism Handbook. Ministry of Health, General Directorate of Health Care Services, BMS Matbaacılık, Ankara; Web Page of Higher Education Council. (www.yok.gov.tr)

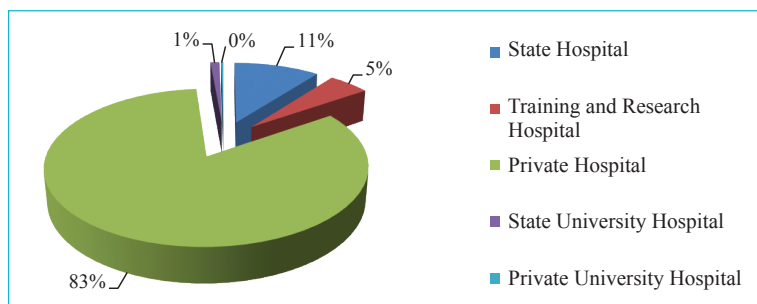
The number of existing hospitals in 2012 was 1393 in total, including 499 private hospitals, 831 public hospitals and 63 university hospitals. Out of public hospitals, the number of state hospitals was 764, the number of training and research hospitals was 67. Among university hospitals, the number of state university hospitals was 50, the number of private university hospitals was 13. The international patients receiving health care services in Turkey in 2012 preferred 899 hospitals in total. It included 499 private hospitals, 308 state hospitals, 66 training and research hospitals and 21 state university hospitals and 5 private university hospitals (Table 4). Although the number of public hospitals in Turkey is high, international patients prefer less than the half of state hospitals and university hospitals being among these hospitals, and almost the whole of training and research hospitals. International patients go to the whole of private hospitals for treatment purposes.

Table 4. Number of International Patients by Type of Hospital, 2012

State Hospital		Training and Research Hospital		State University Hospital		Private University Hospital		Private Hospital	
Number of Hospitals	Number of Patients	Number of Hospitals	Number of Patients	Number of Hospitals	Number of Patients	Number of Hospitals	Number of Patients	Number of Hospitals	Number of Patients
308	27355	66	13042	21	2755	5	752	499	218095

Considering the number of patients per hospital, it is seen that the private hospitals rank first with 437 patients. Private hospitals are followed by training and research hospitals with 198 patients, university hospitals with 135 patients and state hospitals with 89 patients.

Graphic 2. Types of Hospitals Preferred by International Patients, 2012



As is seen from the Graphic 2, international patients prefer private hospitals the most by 83% and university hospitals the least by 1%. A lot of reasons why international patients prefer private sector can be specified. When evaluated in general, private hospitals take place on the top among important destination centers in medical tourism in terms of properties. Private hospitals generally have more advertising activities in medical tourism.

Table 5. How International Patients Come by Type of Hospitals, 2012

Type of Hospital	How Patients Come								Total	
	Countries with Bilateral Agreements		Medical Tourism		Countries Having an Agreement with SGK		Tourist Health			
	Number	%	Number	%	Number	%	Number	%	Number	%
State Hospital	8	1,5	8235	4,9	3328	15,5	15784	22,4	27355	10,4
Training and Research Hospital	534	98,2	4586	2,7	2679	12,4	5243	7,4	13042	5,0
Private Hospital	0	0,0	154696	91,3	15427	71,7	47972	68,1	218095	83,2
State University Hospital	2	0,4	1554	0,9	84	0,4	1115	1,6	2755	1,1
Private University Hospital	0	0,0	391	0,2	12	0,0	349	0,5	752	0,3
Total	544	100,0	169462	100,0	21530	100,0	70463	100,0	261999	100,0

Table 5 gives how the international patients come by type of hospital. It is seen that almost the all patients coming from the countries having bilateral agreements prefer training and research hospitals. Since Bilateral Agreements are made by the Ministry of Health and do not cover private hospitals, these patients do not go to private hospitals under Bilateral Agreements. The majority of patients coming as a medical tourist, under Social Security Institution and under tourist health go to private hospitals. However, for the reason of that the persons having an agreement with Social Security Institution but coming as a Turkish citizen may be registered in the system as a foreign patient, the records of patients receiving service under Social Security Institution could not be kept correctly. When evaluated in general, it is seen that private hospitals are mostly preferred (83,2%). Based on how the patients come, the number of patients coming as medical tourists is the highest with 169.462 patients. The Graphic 3 shows the percentage distribution of patients coming to health care organizations.

Graphic 3. How International Patients Come by Type of Hospital, Distribution by %, 2012

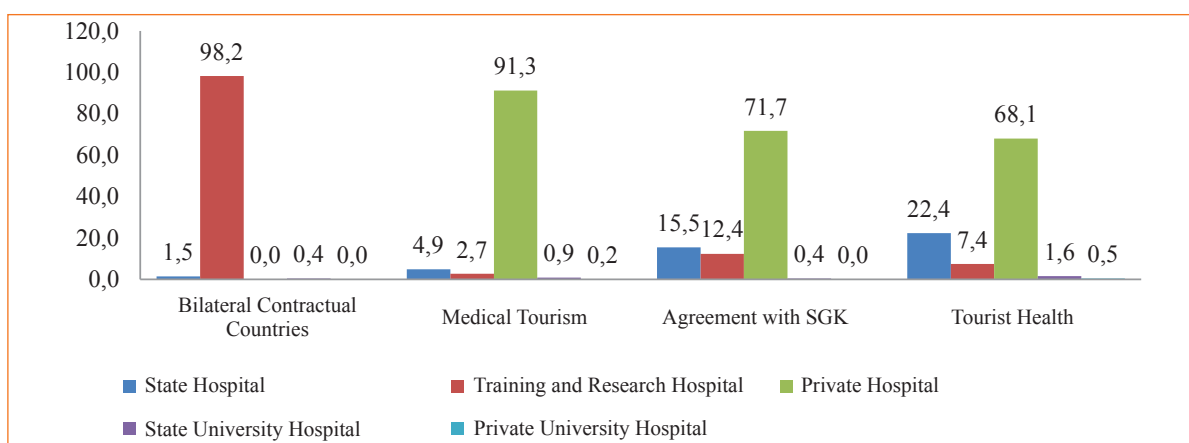


Table 6. Top 10 Private Hospitals Preferred by Patients the Most in Medical Tourism, 2012

Name of Hospital
Private Anadolu Health Center Hospital
Private Alanya Anadolu Hospital
Private Akdeniz Hospital
Private Medical Park Bahçelievler Hospital
Private Acıbadem Maslak Hospital
Private Medical Park Göztepe Hospital Complex
Private Bilgi Hospital
Private World Eye Hospital Ataköy
Private Medicana International Ankara Hospital
Private Bayındır Hospital

When examining the distribution of top 10 hospitals preferred by medical tourists in Table 6, it is seen that Private Anadolu Health Center Hospital located in Kocaeli Gebze ranks first. However, from a general point of view, it is observed that international patients mostly prefer the hospitals located in Istanbul, Antalya and Ankara which they choose for tourism purposes. Accordingly, being a destination in terms of general tourism could be attractive for medical tourism. Another reason is that there are direct international flights in Istanbul and Antalya. The fact that the number of private hospitals and the hospitals having a high brand value is high in Istanbul is thought to be influential in the number of medical tourists preferring this city. On the other hand, that Ankara is getting more prominent; may result from its being a capital, availability of direct flights and its proximity to Middle East countries geographically. The Graphic 4 gives the distribution of top 10 hospitals which admit the highest number of patients under medical tourism.

Graphic 4. Top 10 Private Hospitals Patients Prefer the Most in Medical Tourism, 2012

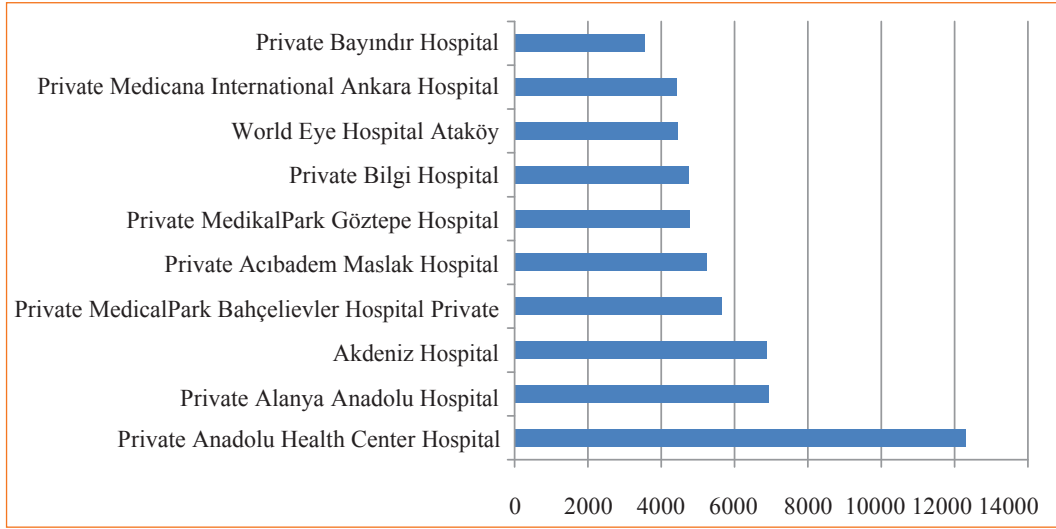


Table 7. Top 10 State Hospitals Medical Patients Prefer the Most in Medical Tourism, 2012

State Hospital
Istanbul Kartal Yavuz Selim State Hospital
Şanlıurfa Harran State Hospital
Mersin Maternity and Children Hospital
Çanakkale State Hospital
Aydın Kuşadası State Hospital
Istanbul Erenköy Physiotherapy and Rehabilitation Hospital
Konya Dr. Faruk Sükan Maternity and Children Hospital
Muğla Marmaris State Hospital
Antalya Kemer State Hospital
Antalya Manavgat State Hospital

Considering the distribution of top 10 state hospitals preferred the most among the state hospitals under medical tourism in Table 7, it is seen that Istanbul Kartal Yavuz Selim State Hospital ranks first. Since Şanlıurfa is close to Iran, Iraq, Syria, etc., Şanlıurfa Harran State Hospital is one of the hospitals preferred the most. The Graphic 5 gives the distribution of these hospitals.

Graphic 5. Top 10 State Hospitals Patients Prefer the Most in Medical Tourism, 2012

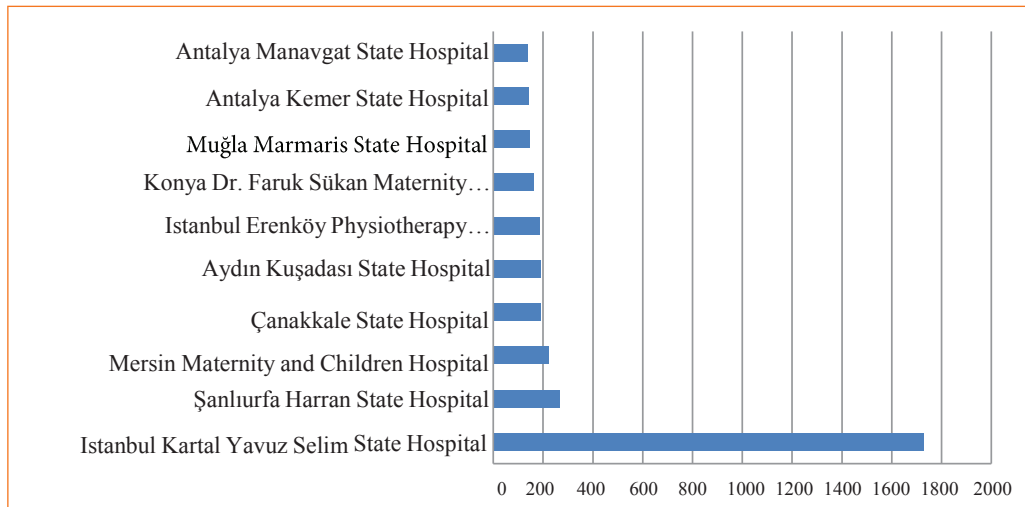


Table 8. Top 10 Training and Research Hospitals Patients Prefer the Most in Medical Tourism, 2012

Training and Research Hospital
Ankara Dr. Zekai TahirBurakWomen’s Health Training and Research Hospital
Istanbul Kanuni Sultan Süleyman Training and Research Hospital
Istanbul Yedikule Chest Diseases and Chest Surgery Training and Research Hospital
Istanbul Şişli Etfal Training and Research Hospital
Ankara Atatürk Training and Research Hospital
Antalya Training and Research Hospital
Istanbul Haydarpaşa Numune Training and Research Hospital
Bursa Şevket Yılmaz Training and Research Hospital
Istanbul Prof. Dr. N. Reşat Belger Beyoğlu Eye Training and Research Hospital
Trabzon Numune Training and Research Hospital

When examining the distribution of top 10 hospitals preferred the most among training and research hospitals under medical tourism in Table 8, it is seen that Ankara Dr. Zekai Tahir Burak Women’s Health Training and Research Hospital ranks first and most of these hospitals are located in Ankara and Istanbul. The Graphic 6 gives the distribution of these hospitals.

Graphic 6. Top 10 Training and Research Hospitals Patients Prefer the Most in Medical Tourism, 2012

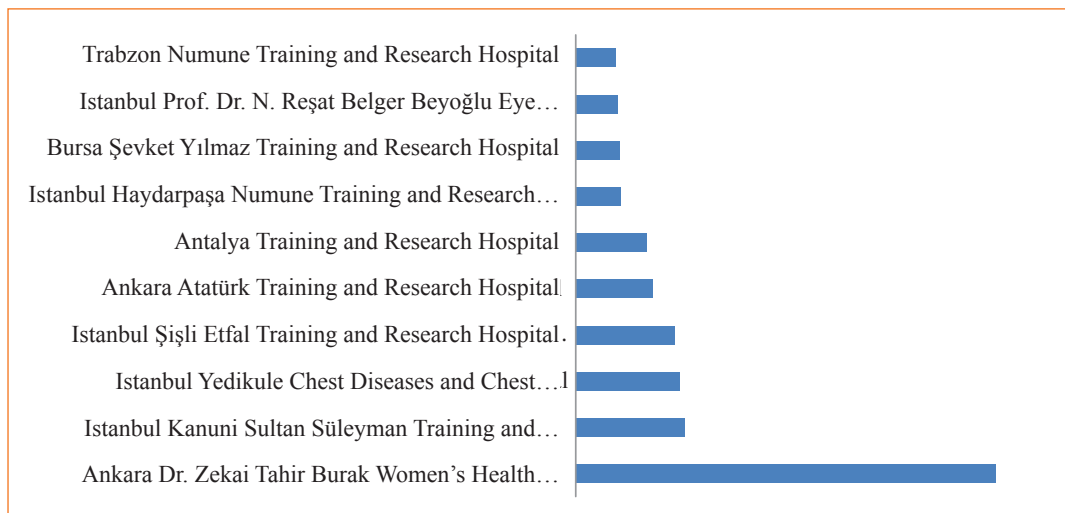


Table 9. Top 10 University Hospitals Patients Prefer the Most in Medical Tourism, 2012

Name of Hospital
Gaziantep University Şahinbey Hospital
Edirne Trakya University Medical Faculty Hospital
Karadeniz Technical University Farabi Hospital
Konya Başkent University Konya Application and Research Center
Antalya Başkent University Application and Research Center
Konya Necmettin Erbakan University Meram Medical Faculty Hospital
İzmir Ege University Medical Faculty Hospital
Ankara University Medical Faculty Cebeci Research and Application Hospital
İzmir Dokuz Eylül University Medical Faculty Hospital
Aydın Adnan Menderes University Research and Application Hospital

When examining the Table 9 which shows the distribution of top 10 hospitals preferred the most among university hospitals under medical tourism, it is seen that Gaziantep University Şahinbey Hospital is in the first place. The Graphic 7 gives the distribution of these hospitals.

Graphic 7. Top 10 University Hospitals Patients Prefer the Most in Medical Tourism, 2012

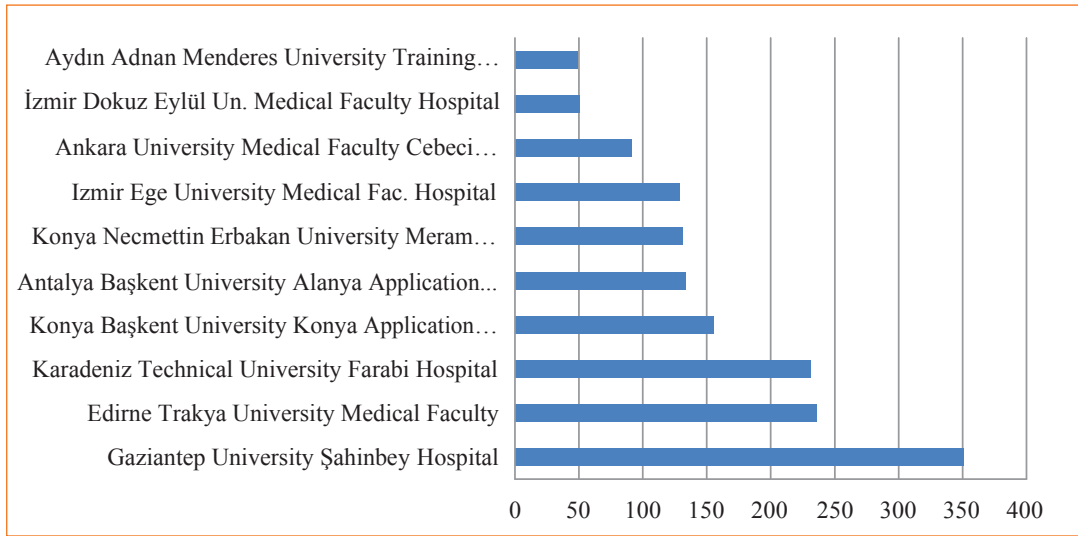


Table 10. Top 10 Health Care Organizations Patients Prefer the Most under Tourist Health, 2012

Health Care Organizations
Private Hisar Medical Center
Private Care Net Polyclinic Belek Branch
Private Bilgi Hospital
Private Aspendos Hospital
Private Anadolu Hospital
Private Sahil Polyclinic
Private Didyma Health Polyclinic
Private Akdeniz Hospital
Private Acibadem Maslak Hospital
Private AntalyaYaşam Hospital

When examining the distribution of top 10 health care organizations preferred the most among hospitals under tourist health, it is seen that Private Hisar Medical Center located in Antalya Manavgat ranks first with 7232 patients (Table10 and Graphic 8).

Graphic 8. Top 10 Health Care Organizations Patients Prefer the Most under Tourist Health, 2012

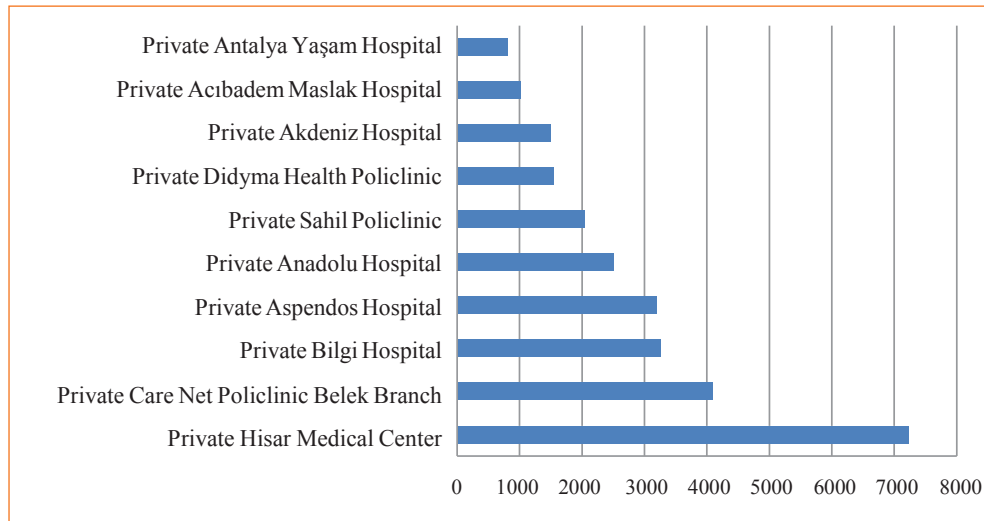


Table 11. Top 10 Public Hospitals Patients Prefer the Most under Tourist Health, 2012

Name of Hospital
Antalya Training and Research Hospital
Aydın Kuşadası State Hospital
Istanbul Kartal Yavuz Selim State Hospital
Sakarya Ministry of Health Sakarya University Training and Research Hospital
Muğla Marmaris State Hospital
Antalya Kemer State Hospital
Antalya Manavgat State Hospital
Muğla Bodrum State Hospital
Muğla Fethiye State Hospital
Istanbul Bakırköy Dr. Sadi Konuk Training and Research Hospita

Considering the distribution of top 10 public hospitals (State Hospital, Training and Research Hospital, University Hospital) under tourist health, it is seen that Antalya Training and Research Hospital stands out. When examining the distributions in general, cities attracting tourists such as Muğla, Antalya and Istanbul are preferred more (Table 11 and Graphic 9).

Graphic 9. Top 10 Public Hospitals Patients Prefer the Most under Tourist Health, 2012

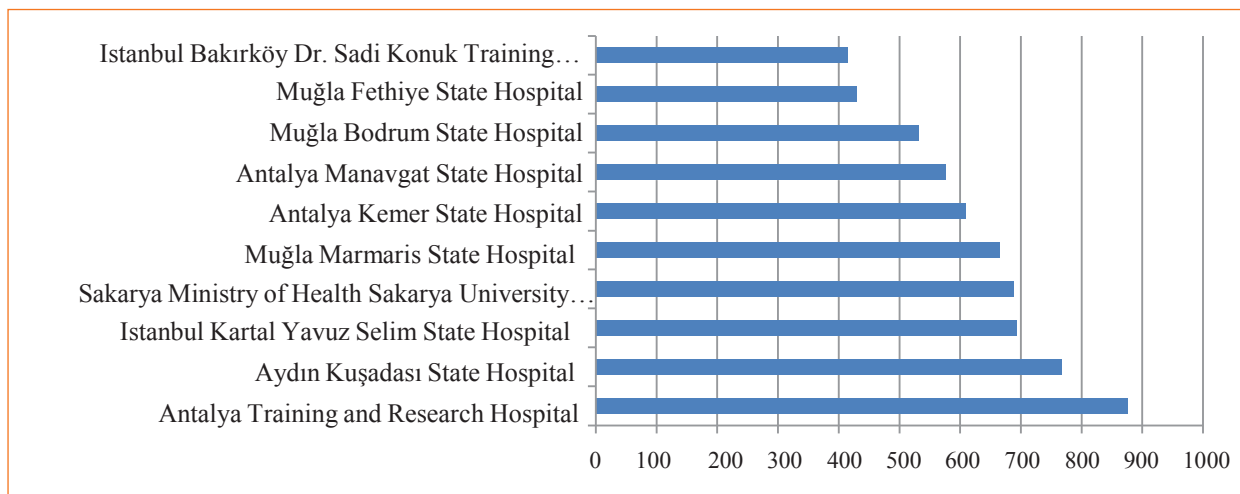
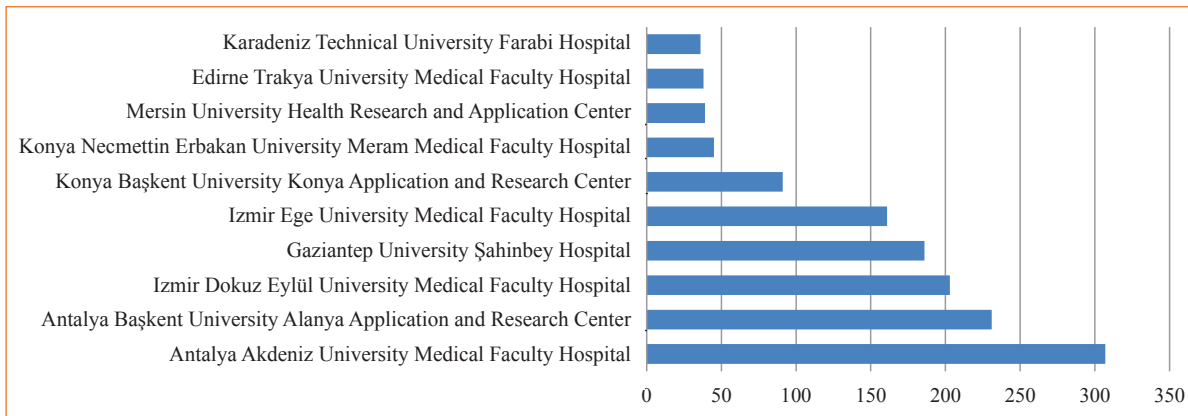


Table 12. Top 10 University Hospitals Patients Prefer the Most under Tourist Health, 2012

Name of Hospital
Antalya Akdeniz University Medical Faculty Hospital
Antalya Başkent University Alanya Application and Research Hospital
İzmir Dokuz Eylül University Medical Faculty Hospital
Gaziantep University Şahinbey Hospital
İzmir Ege University Medical Faculty Hospital
Konya Başkent University Konya Application and Research Center
Konya Necmettin Erbakan University Meram Medical Faculty Hospital
Mersin University Health Research and Application Center
Edirne Trakya University Medical Faculty Hospital
Karadeniz Technical University Farabi Hospital

When considering the distribution of the top 10 university hospitals under tourist health, it is seen that Antalya Akdeniz University Medical Faculty Hospital is in the first place (Table 12 and Graphic 10).

Graphic 10. Top 10 University Hospitals patients Prefer the Most under Tourist Health, 2012



Since the number of patients coming from the countries having an agreement with the Social Security Institution and those coming under bilateral agreements on health is few, the tables and graphics relating to the data of the hospitals preferred the most are not provided.

4.3. Distribution of International Patients by City

Table 13. Top 10 Cities International Patients Prefer, 2012

Cities	Number
Antalya	87167
İstanbul	68842
Ankara	18926
Kocaeli	14101
İzmir	13925
Muğla	13183
Aydın	7128
Karaman	4590
Adana	4031
Sakarya	3493

International patients are evaluated as patients who come to Turkey from a foreign country and receive health care services (Figure 1). The list of all the cities which international patients come to is presented in the APPENDIX 1. The first of the cities which international patients prefer the most is Antalya, which is among the most preferred cities in tourism. The most preferred cities are respectively Istanbul, Ankara, Kocaeli, Izmir, Muğla, Aydın, Karaman, Adana and Sakarya (Table13 and Graphic 11). That Adana is among top 10 ranking results from Acıbadem Hospital, and that Sakarya is among top 10 ranking results from that it has higher number of refugees.

Graphic 11. Top 10 Cities International Patients Prefer, 2012

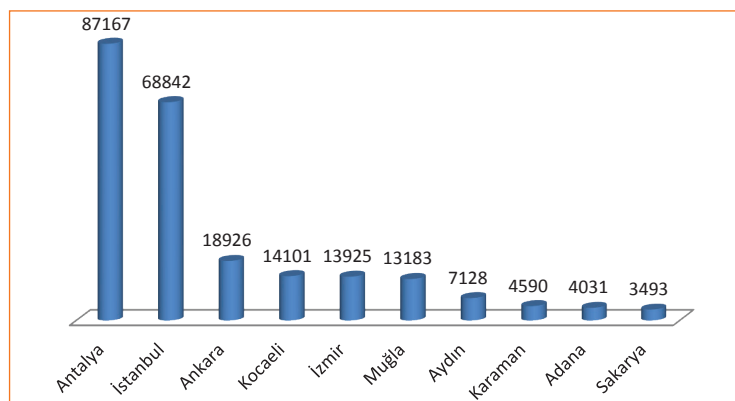


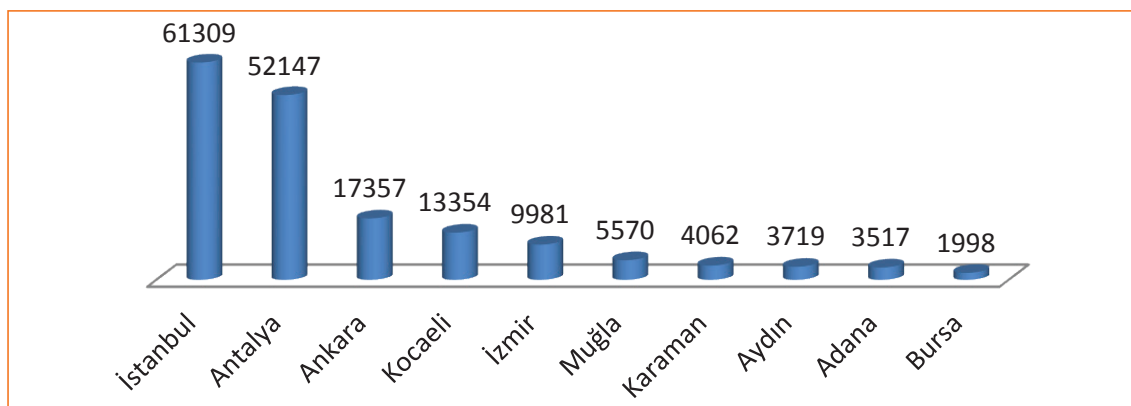
Table 14. Top 10 Cities Preferred the Most by Patients Coming under Medical Tourism, Patients Coming from Countries Having Bilateral Agreements and Patients Coming from Countries Having an Agreement with Social Security Institution

Rank No	Year 2012		Year 2011	
	Cities	Number	Cities	Number
1	İstanbul	61309	İstanbul	25073
2	Antalya	52147	Kocaeli	10947
3	Ankara	17357	Ankara	7708
4	Kocaeli	13354	Antalya	6579
5	İzmir	9981	Muğla	1941
6	Muğla	5570	Samsun	1938
7	Karaman	4062	Adana	1048
8	Aydın	3719	Karaman	658
9	Adana	3517	Aksaray	573
10	Bursa	1998	İzmir	308

When examining the number of patients coming under medical tourism, those coming from countries having bilateral agreements and those coming under the agreement with Social Security Institution, it is seen that top 10 cities standing out in 2012 are respectively Istanbul, Antalya, Ankara, Kocaeli, Izmir, Muğla, Karaman, Aydın, Adana and Bursa . Considering the number of patients in 2011 and 2012, it is observed that the place of Istanbul ranking first in 2011 has not changed in 2012, but the number of incoming patients increased more than double. This shows that Istanbul attracts higher number of tourists with its developed hospitals in years. Antalya received quite high number of patients in 2012 and this number increased from 6579 to 52147 (Table14).

As is seen in the Table 14, the cities which are prominent for general tourism among the top 10 cities that medical tourists prefer in Turkey are in the first places. According to the data of T.R. Ministry of Culture and Tourism for the year 2012, the city which receives the highest number of tourist is Istanbul. Also, it is evaluated that our cities placed among top 10 destinations are strong in terms of infrastructure of health care services and that private sector stands out qualitatively and quantitatively. In addition to the above characteristic, the fact of that Adana is close to Middle East countries geographically can be a parameter. On the other hand, the availability of direct international flights in especially Istanbul, Izmir, Antalya, Ankara, Muğla etc. can be said to have increased the request for medical tourism.

Graphic 12. Medical Tourism-Top 10 Cities Patients Prefer the Most, 2012



The cities that patients prefer the most in medical tourism are respectively Istanbul, Antalya, Ankara, Kocaeli, Izmir, Muğla, Karaman, Aydın, Adana and Bursa (Graphic 12)

The distribution of medical tourists throughout the all cities of our country is shown in the Map 1, and the distribution of patients receiving services under tourist health throughout the all cities is shown in the Map 2.

Map 1. Distribution of Medical Tourists by City, 2012

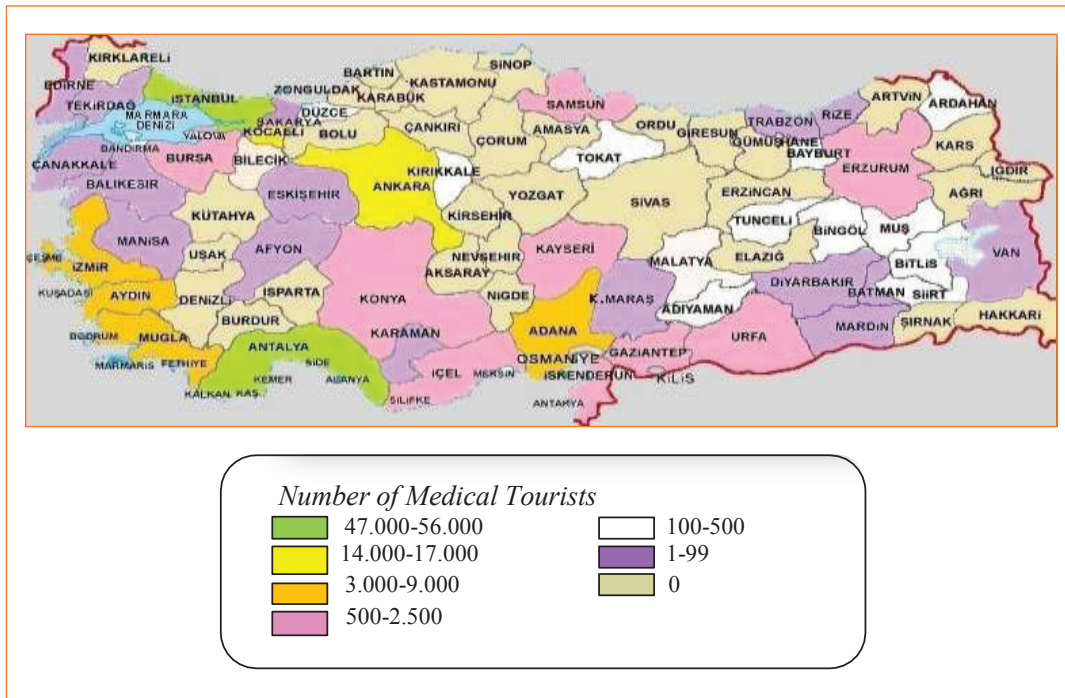
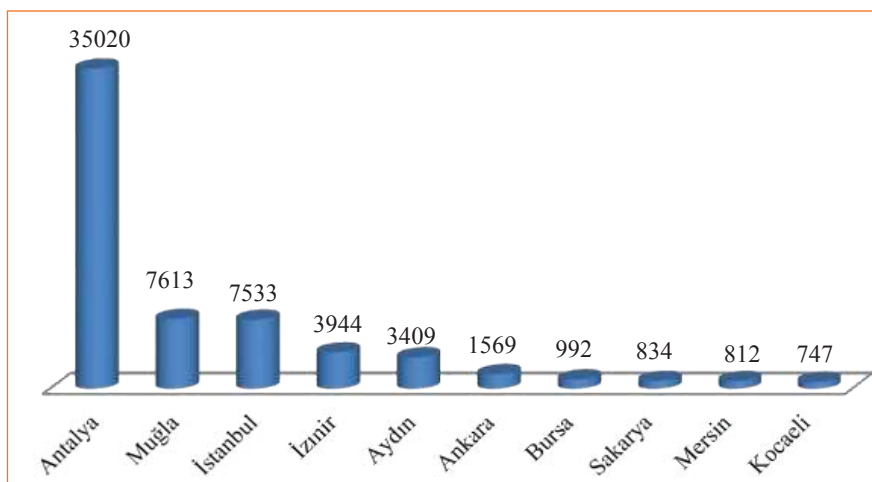


Table 15. Tourist Health-Top 10 Cities Patients Preferred the Most

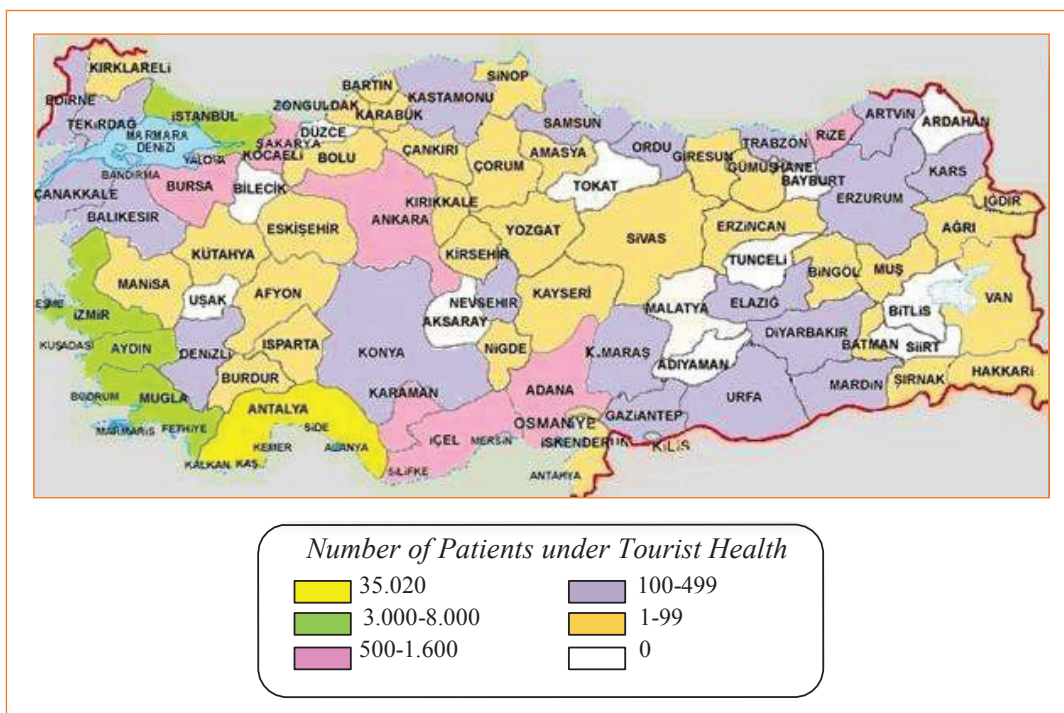
Rank No	Year 2012		Year 2011	
	Cities	Number	Cities	Number
1	Antalya	35020	Antalya	46583
2	Muğla	7613	İstanbul	14735
3	İstanbul	7533	Muğla	8434
4	İzmir	3944	İzmir	4479
5	Aydın	3409	Ankara	3207
6	Ankara	1569	Aydın	2824
7	Bursa	992	Trabzon	1250
8	Sakarya	834	Bursa	1087
9	Mersin	812	Nevşehir	914
10	Kocaeli	747	Konya	859

Based on the information given in the Table15, Antalya being in the first place in 2011 under tourist health ranks the same in 2012, but the number of patients in Antalya in 2012 decreased in 2011. When evaluated in general, a decline is seen based on tope 10 cities. The Graphic 13 gives the distribution of patients by cities.

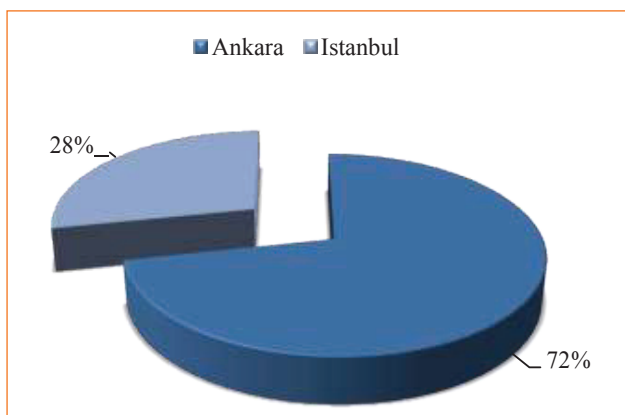
Graphic 13. Tourist Health-Top 10 Cities Patients Prefer the Most, 2012



Map 2. Distribution of Patients under Tourist Health By City, 2012

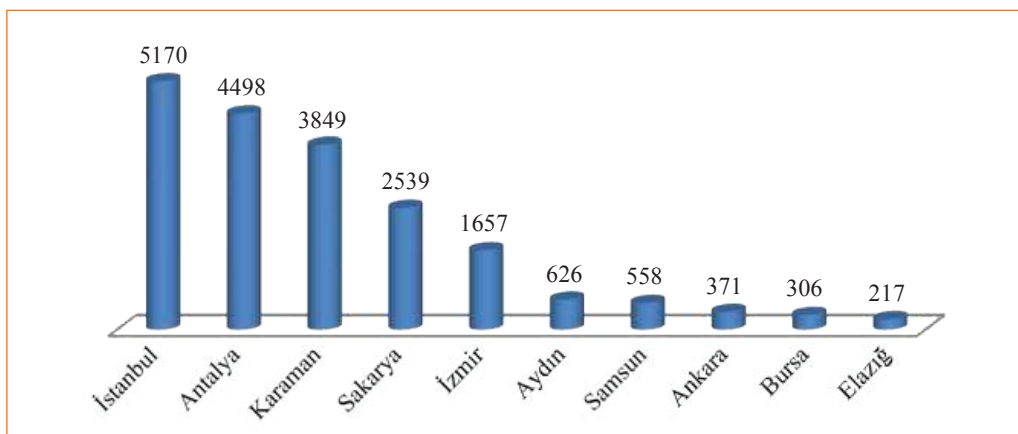


Graphic 14. Distribution of Cities Preferred by Patients under Bilateral Agreements, 2012



The patients coming under Bilateral Agreements can receive treatment only in Istanbul and Ankara. The distribution of these two cities is given in the Graphic 14. So, 72% of 544 patients coming under bilateral agreements prefer the hospitals located in Ankara.

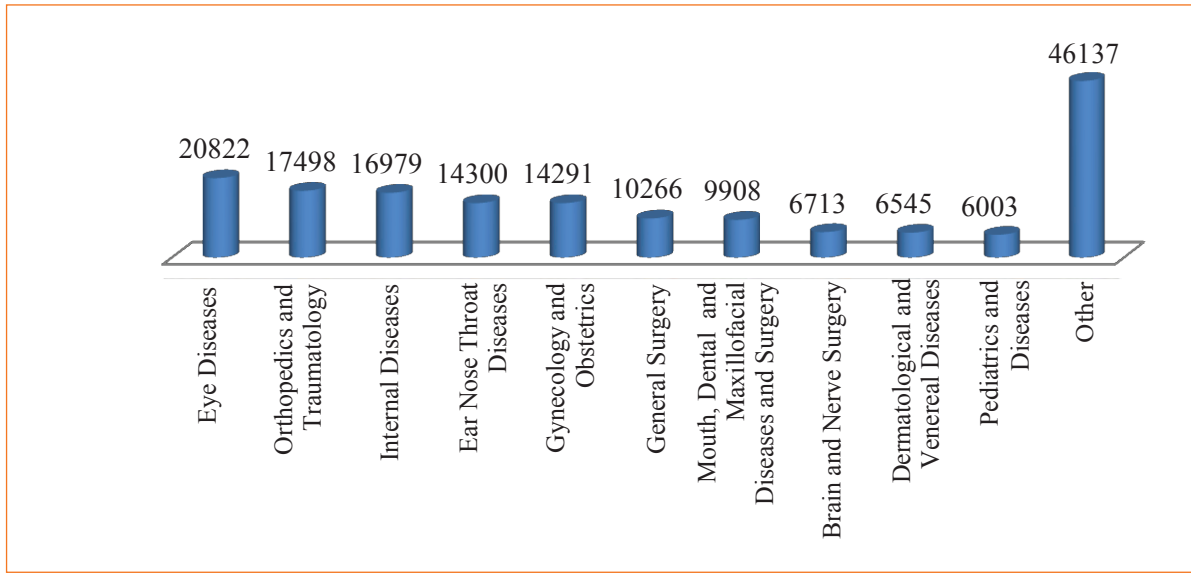
Graphic 15. Top 10 Cities Preferred the Most by Patients under Social Security Institution, 2012



Istanbul is in the first place among the top 10 cities preferred the most by the patients coming under the agreement with the Social Security Institution. The other cities are respectively Antalya, Karaman, Sakarya, Izmir, Aydın, Samsun, Ankara, Bursa and Elazığ (Graphic 15). Konya and Kayseri cannot be placed among the top 10 cities because the records could not be kept correctly, even though they are heavily preferred by expats.

4.4. Distribution of International Patients by Clinic

Graphic 16. Distribution of Patients Coming under Medical Tourism by Clinic throughout Turkey 2012



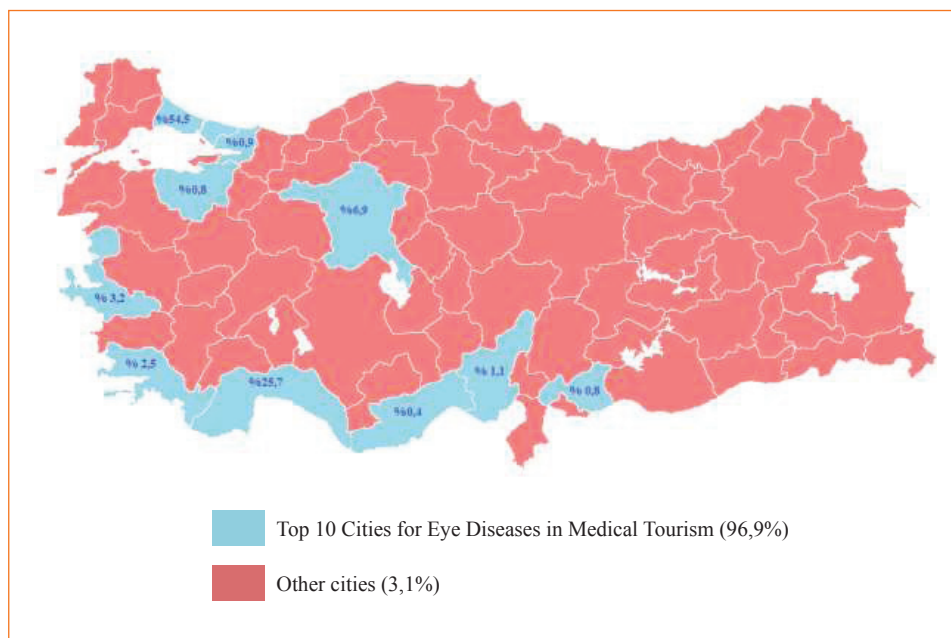
The list of all clinics preferred by international patients is given in the APPENDIX 2. When examining the distribution of patients coming under medical tourism by clinics, Eye Disease is in the first place with 20.822 patients (Graphic 16). Eye Disease is a clinic that is generally in the foreground in medical tourism. Also, it is known that some private eye hospitals in Turkey have high technology, provide high-quality service, are accredited and carry out internationally important activities regarding medical tourism. However, an evaluation for sub-units has not been made here; considering the sub-units, it is known that Oncology, Cardiovascular and Esthetic Surgery are seriously in the foreground.

For Eye, which is a clinic preferred the most by medical tourists; it is determined that Istanbul, Antalya and Ankara are preferred the most respectively (Table 16 and Map 3).

Table 16. Medical Tourism-Top 10 Cities Patients Prefer for Eye Diseases, 2012

Cities	Number	Percentage
İstanbul	11341	54,5
Antalya	5355	25,7
Ankara	1434	6,9
İzmir	673	3,2
Muğla	521	2,5
Adana	233	1,1
Kocaeli	191	0,9
Bursa	171	0,8
Gaziantep	168	0,8
Mersin	88	0,4
Diğer	647	3,1
Toplam	20822	100,0

Map 3. Top 10 Cities Patients Prefer for Eye Diseases in Medical Tourism, 2012

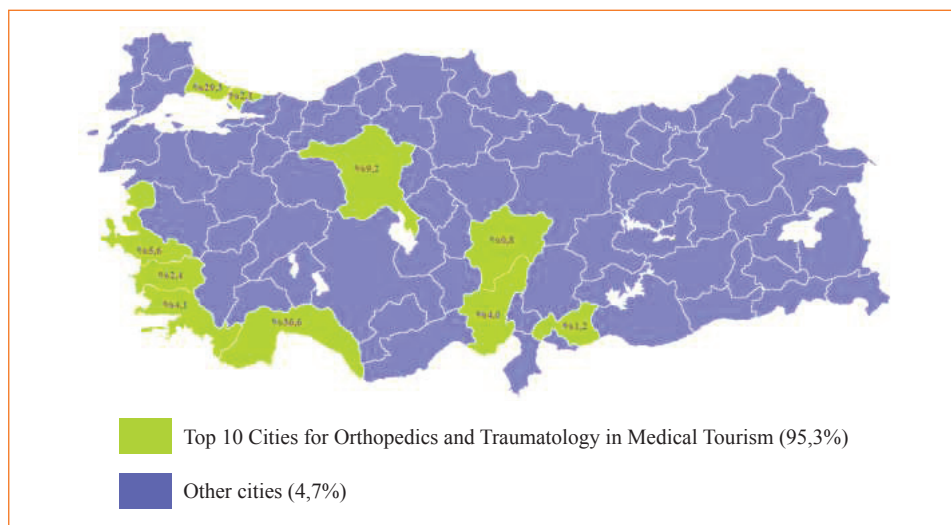


For Orthopedics and Traumatology, which is the second clinic preferred the most by patients in medical tourism, Antalya, Istanbul and Ankara are preferred the most respectively (Table 17 and Map 4).

Table 17. Medical Tourism-Top 10 Cities Patients Prefer for Orthopedics and Traumatology, 2012

Cities	Number	Percentage
Antalya	6404	36,6
İstanbul	5127	29,3
Ankara	1602	9,2
İzmir	981	5,6
Muğla	712	4,1
Adana	697	4,0
Aydın	424	2,4
Kocaeli	370	2,1
Gaziantep	208	1,2
Kayseri	142	0,8
Diğer	831	4,7
Toplam	17498	100,0

Map 4. Cities Medical Tourists Prefer for Orthopedics and Traumatology, 2012



For Internal Diseases, which is the third clinic preferred by medical tourists the most, Antalya, Istanbul and Ankara are chosen respectively (Table 18 and Map 5).

Table 18. Medical Tourism-Top 10 Cities Patients Prefer for Internal Diseases, 2012

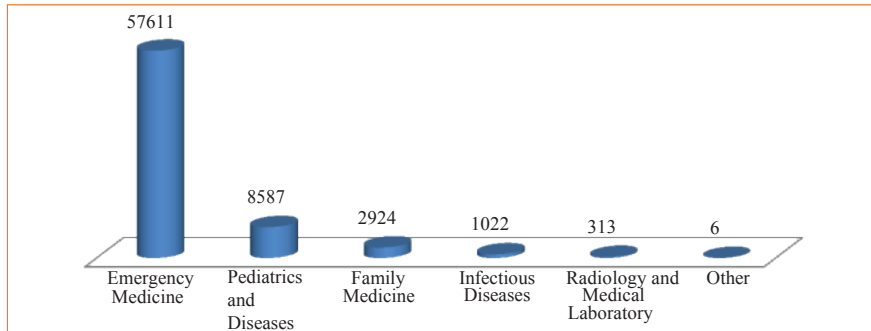
Cities	Number	Percentage
Antalya	7489	44,1
İstanbul	4253	25,0
Ankara	1089	6,4
Muğla	1046	6,2
Aydın	604	3,6
İzmir	516	3,0
Kocaeli	482	2,8
Gaziantep	167	1,0
Bursa	160	0,9
Samsun	134	0,8
Diğer	1039	6,1
Toplam	16979	100,0

Map 5. Top 10 Cities Medical Patients Prefer for Internal Diseases, 2012



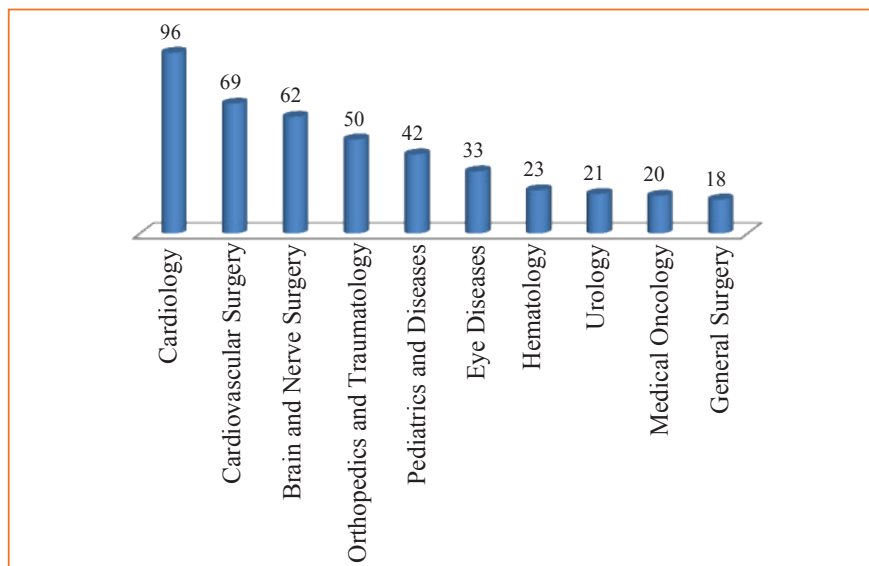
Considering the distribution of patients coming under tourist health by clinics, the clinic the most frequently preferred by patients is Emergency Medicine (Graphic 17). Since that the persons visiting our country as a tourist for a purpose other than health get ill and refer to health care organizations is under tourist health, it is expected that the number of referrals to Emergency Medicine is high.

Graphic 17. Distribution of Patients under Tourist Health by Clinic throughout Turkey, 2012



Patients coming under Bilateral Agreements refer to Cardiology, Cardiovascular Surgery, Brain and Nerve Surgery clinics (Graphic 18).

Graphic 18. Distribution of Patients Coming under Bilateral Agreements by Clinic throughout Turkey, 2012



Patients having an agreement with Social Security Institution prefer the most Eye Diseases, Internal Diseases, Pediatric clinics (Graphic 19).

Graphic 19. Distribution of Patients under Social Security Institution by Clinic throughout Turkey, 2012

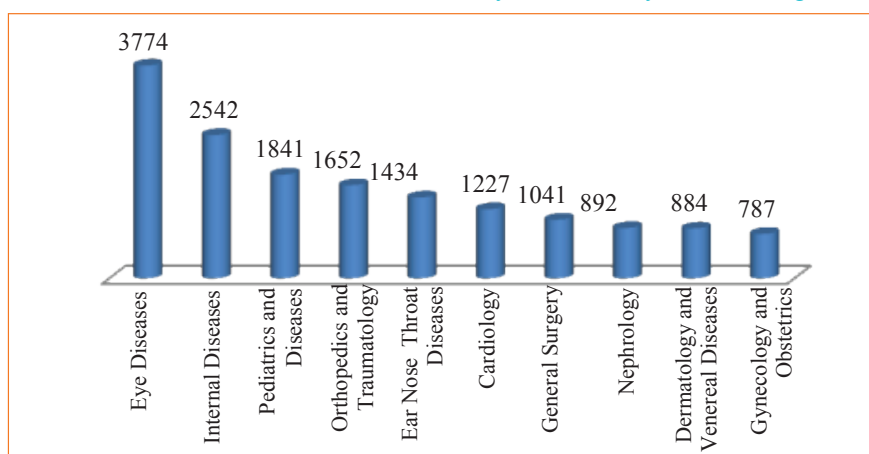


Table 19. Patients Preferring the Clinics with High Level of Technology, 2012

Clinics	How Patients Come				Total
	Countries with Bilateral Agreements	Medical Tourism	Countries Having an Agreement with SGK	Tourist Health	
Brain and Nerve Surgery	62	6713	502	3	7280
Cardiovascular Surgery	69	3139	173	0	3381
Cardiology	96	5947	1227	0	7270
Orthopedics and Traumatology	50	17498	1652	0	19200
Medical Oncology	20	5726	120	0	5866

Considering the number of patients coming to the clinics where technology is intensively used, it is found that 96 patients from the countries with bilateral agreements come to the Cardiology clinic; 17498 patients under medical tourism come to the Orthopedics and Traumatology clinic; 1652 patients under the agreement with Social Security Institution and only 3 patients under tourist health come to the Brain and Nerve Surgery. In total, 19200 international patients come to the Orthopedics and Traumatology clinic the most (Table19).

Table 20. Distribution of Top 10 Clinics by Health Care Organization in Medical Tourism, 2012

Clinics	Health Care Organizations				Total
	State Hospital	Training and Research Hospital	Private Hospital	University Hospital	
Eye Diseases	461	208	20050	103	20822
Orthopedics and Traumatology	685	238	16433	142	17498
Internal Diseases	796	178	15941	64	16979
Ear Nose Throat Diseases	432	111	13629	128	14300
Gynecology and Obstetrics	1257	1516	11352	166	14291
General Surgery	602	179	9389	96	10266
Mouth, Dental and Maxillofacial Diseases and Surgery	1586	32	8262	28	9908
Brain and Nerve Surgery	131	89	6449	44	6713
Dermatological and Venereal Diseases	292	111	6039	103	6545
Pediatrics and Diseases	495	374	4967	167	6003
Other	1498	1550	42185	904	46137
Total	8235	4586	154696	1945	169462

Considering the distribution of health care organizations preferred by the patients under medical tourism by clinics, it is seen that they mostly prefer private hospitals for the clinics among top 10. Compared to the other clinics, state hospitals are preferred the most for “Mouth, Dental and Maxillofacial Diseases and Surgery”, and training and research hospitals for “Gynecology and Obstetrics” (Table 20 and Graphic 20).

Graphic 20. Distribution of Top 10 Clinics by Types of Hospitals in Medical Tourism, 2012

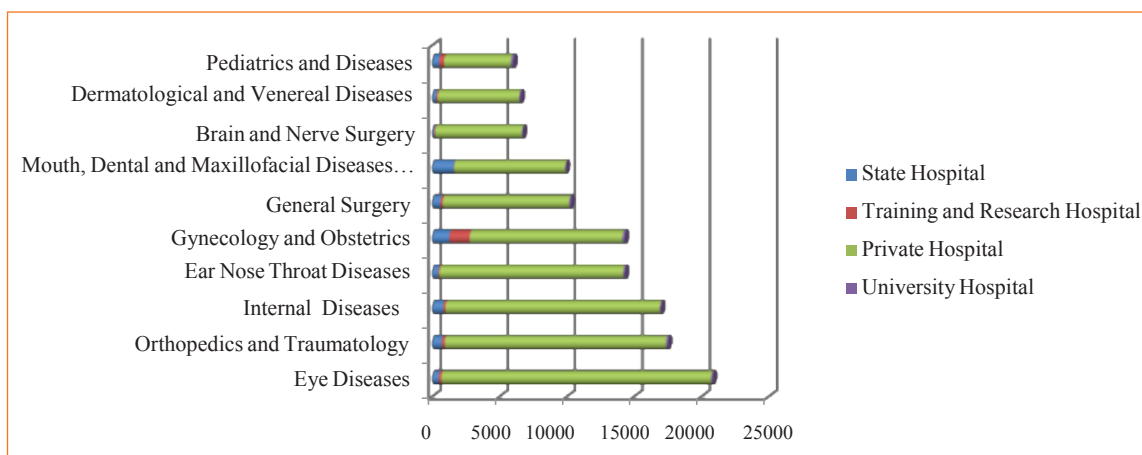


Table 21. Distribution of the Clinics Providing Services under Tourist Health by Type of Hospital, 2012

Clinics	Type of Hospital				Total
	State Hospital	Training and Research Hospital	Private Hospital	University Hospital	
Emergency	14763	4882	36692	1274	57611
Pediatrics and Diseases	130	38	8364	55	8587
Family Medicine	419	188	2226	91	2924
Infectious Diseases	439	115	431	37	1022
Radiology and Medical Laboratory	33	20	253	7	313

When examining the distribution of health care organizations that the patients receiving service under tourist health prefer based on clinics, it is seen that they rather prefer private hospitals for all clinics. Both state and training and research hospitals are mostly preferred for Emergency Medicine among all clinics (Table 21 and Graphic 21).

Graphic 21. Clinics Providing Service under Tourist Health by Type of Hospitals, 2012

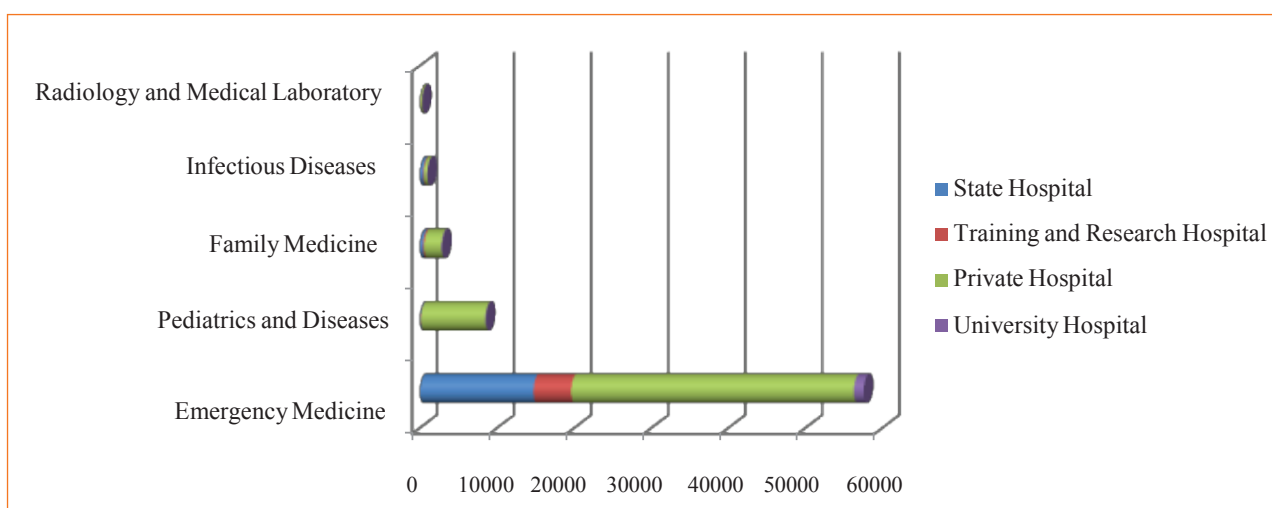


Table 22. Distribution of the Clinics Providing Service under Bilateral Agreements by Type of Hospital, 2012

Clinics	State Hospital	Training and Research Hospital	University Hospital	Total
Cardiology	0	96	0	96
Cardiovascular Surgery	0	69	0	69
Brain and Nerve Surgery	1	60	1	62
Orthopedics and Traumatology	0	50	0	50
Pediatrics and Diseases	0	41	1	42
Eye Diseases	0	33	0	33
Hematology	2	21	0	23
Urology	0	21	0	21
Medical Oncology	0	20	0	20
General Surgery	1	17	0	18

When examining the distribution of patients under Bilateral Agreements with Countries by types of hospitals, it is seen that almost all of them refer to training and research hospitals (Table 22 and Graphic 22).

Graphic 22. Clinics Providing Service under Bilateral Agreements by Type of Hospital, 2012

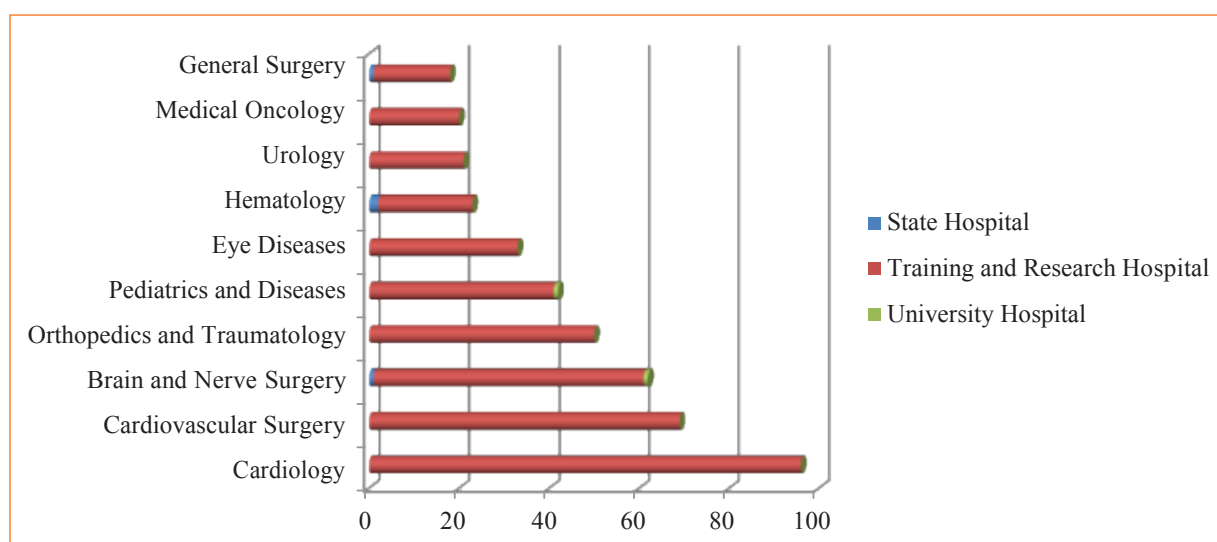


Table 23. Distribution of the Clinics Providing Service under Social Security Institution by Type of Hospital, 2012

Clinics	State Hospital	Training and Research Hospital	Private Hospital	University Hospital	Total
Eye Diseases	182	173	3419	0	3774
Internal Diseases	484	246	1809	3	2542
Pediatrics and Diseases	370	85	1355	31	1841
Orthopedics and Traumatology	203	190	1253	6	1652
Ear Nose Throat Diseases	192	133	1104	5	1434
Cardiology	99	239	887	2	1227
General Surgery	185	76	775	5	1041
Nephrology	0	163	729	0	892
Dermatology and Venereal Diseases	179	202	497	6	884
Gynecology and Obstetrics	149	94	541	3	787

The patients coming under the agreement with Social Security Institution rather prefer private hospitals for all clinics. The number of referrals to university hospitals is quite low (Table 23 and Graphic 23).

Graphic 23. Distributions of Clinics Providing Service under Social Security Institution by Type of Hospital, 2012

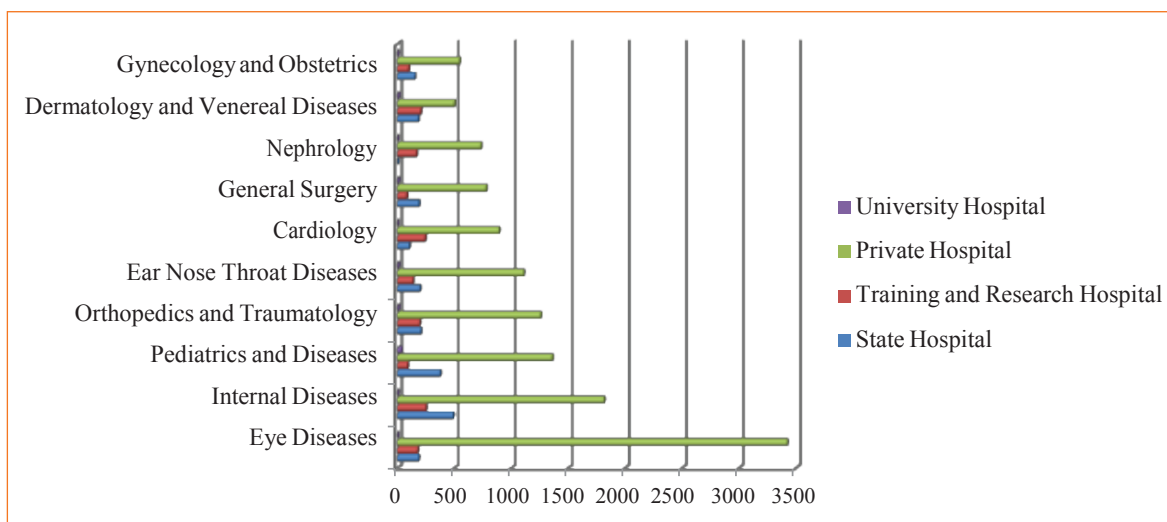


Table 24. Medical Tourism – Number of Patients in Top 10 Cities based on Top 10 Clinics, 2012

Cities	Clinics										Total
	Eye Diseases	Orthopedics and Traumatology	Internal Diseases	Ear Nose Throat Diseases	Gynecology and Obstetrics	General Surgery	Mouth, Dental and Maxillofacial Diseases and	Brain and Nerve Surgery	Dermatology and Venereal Diseases	Pediatrics and Diseases	
İstanbul	11341	5127	4253	3472	4147	2317	2244	1906	2772	3160	55985
Antalya	5355	6404	7489	6858	2699	4023	3436	2288	1162	102	47649
Ankara	1434	1602	1089	1307	2039	833	1151	829	978	773	16596
Kocaeli	191	370	482	298	991	666	54	311	184	235	13256
İzmir	673	981	516	613	760	664	1041	244	506	82	8324
Muğla	521	712	1046	344	421	442	304	188	178	16	5430
Adana	233	697	124	195	302	120	237	262	139	104	3459
Aydın	79	424	604	299	133	492	218	55	52	423	3093
Gaziantep	168	208	167	144	256	93	92	219	88	109	2198
Bursa	171	114	160	111	279	73	353	31	70	116	1998

Top 10 Cities and the distribution of these top 10 clinics preferred based on clinics under medical tourism are given in the Table 24. Based on the data in the table, it is seen that Istanbul is the most preferred city for Eye Diseases, Gynecology and Obstetrics, Dermatology and Venereal Diseases and Pediatrics and Diseases; and Antalya is the most preferred city for Orthopedics and Traumatology, Internal Diseases, Ear Nose Throat Diseases, General Surgery, Mouth, Dental and Maxillofacial Diseases and Surgery and Brain and Nerve Surgery.

Table 25. Tourist Health – Number of Patients in Top 10 Cities by Clinic, 2012

Cities	Clinics					Total
	Emergency Medicine	Family Medicine	Pediatrics and Diseases	Infectious Diseases	Radiology and Medical Laboratory	
Antalya	26211	536	7974	264	30	35020
Muğla	6168	1127	248	70	0	7613
İstanbul	6750	384	0	200	198	7533
İzmir	2960	508	365	105	6	3944
Aydın	3328	4	0	77	0	3409
Ankara	1521	3	0	26	19	1569
Bursa	974	0	0	15	3	992
Sakarya	833	0	0	0	1	834
Mersin	810	0	0	2	0	812
Kocaeli	650	20	0	67	10	747

When the tourists visiting our country for reasons other than health suddenly get ill, they refer to the hospitals in Antalya the most for Emergency Medicine, Pediatrics and Diseases, and Infectious Diseases. For Family Medicine, Muğla is chosen, for Radiology and Medical Laboratory, Istanbul is chosen (Table 25).

Table 26. Countries with Bilateral Agreements– Number of Patients by City and Top 10 Clinics, 2012

Cities	Clinics										Total
	Cardiology	Cardiovascular Surgery	Brain and Nerve Surgery	Orthopedics and Traumatology	Pediatrics and Diseases	Eye Diseases	Hematology	Urology	Medical Oncology	General Surgery	
Ankara	73	27	55	43	33	19	21	19	17	6	390
İstanbul	23	42	7	7	9	14	2	2	3	12	154

The patients from Countries under Bilateral Agreements prefer Cardiovascular Surgery among top 10 clinics and come to Ankara for other than General Surgery clinics (Table 26).

Table 27. Patients Coming under Bilateral Agreements – Number of Patients in Top 10 Cities based on Top 10 Clinics, 2012

Cities	Clinics										Total
	Eye Diseases	Internal Diseases	Pediatrics and Diseases	Orthopedics and Traumatology	Ear Nose Throat Diseases	Cardiology	General Surgery	Nephrology	Dermatology and Venereal Diseases	Gynecology and Obstetrics	
İstanbul	2188	331	274	168	127	224	154	18	160	119	5170
Antalya	344	478	439	315	362	246	193	730	213	138	4498
Karaman	462	939	323	569	449	395	336	0	0	164	3849
Sakarya	301	236	51	181	122	226	67	128	184	61	2539
İzmir	174	165	114	202	111	79	60	4	129	87	1657
Aydın	63	102	82	74	67	26	46	0	15	31	626
Samsun	44	29	61	37	42	8	52	0	62	12	558
Ankara	71	61	35	9	15	5	24	0	16	61	371
Bursa	20	26	33	13	8	2	8	11	11	7	306
Elazığ	1	0	12	0	0	1	5	0	2	0	217

The patients coming under Social Security Institution prefer Istanbul for Eye Clinic among top 10 clinics; Antalya for Pediatrics and Diseases, Nephrology, Dermatology and Venereal Diseases; Karaman for Internal Diseases, Orthopedics and Traumatology, Ear Nose Throat Diseases, Cardiology, General Surgery and Gynecology and Obstetrics (Table 27).

Table 28. Medical Tourism– Hospitals Preferred based on Top 10 Clinics, 2012

Hospital	Clinics									
	Mouth, Dental and Maxillofacial Diseases and Surgery	Brain and Nerve Surgery	Pediatrics and Diseases	Dermatology and Venereal Diseases	General Surgery	Eye Diseases	Internal Diseases	Gynecology and Obstetri	Ear Nose Throat Diseases	Orthopedics and Traumatology
Private Anadolu Health Center Hospital	12	271	210	128	601	104	382	868	224	268
Private Alanya Anadolu Hospital	1	474	8	275	358	364	1524	293	1016	887
Private Akdeniz Hospital	0	769	4	0	728	0	1618	178	2001	1000
Private Medical Park Bahçelievler Hospital	259	277	246	300	248	495	572	431	358	670
Private Acıbadem Maslak Hospital	24	227	698	375	149	333	188	705	356	297
Private Medical Park Göztepe Hospital Complex	523	86	129	221	196	643	394	212	415	465
Private Bilgi Hospital	11	20	12	24	705	178	852	151	1113	1016
Private World Eye Hospital Ataköy	0	0	0	0	0	4434	2	0	0	0
Private Medicana International Ankara Hospital	255	252	156	277	216	314	420	172	378	535
Private Bayındır Hospital	156	189	233	313	154	259	194	235	317	310

When examining the health care organizations preferred by the patients based on top 10 clinics under medical tourism, it is found that Private Medical Park Göztepe Hospital Complex is preferred for Mouth, Dental and Maxillofacial Diseases and Surgery; Private Akdeniz Hospital for Brain and Nerve Surgery, Internal Diseases, Ear Nose Throat Diseases; Private Acıbadem Maslak Hospital for Pediatrics and Diseases, Dermatology and Venereal Diseases; Ataköy Branch of Private World Eye Hospital for Eye Diseases; Private Anadolu Health Center Hospital for Gynecology and Obstetrics; Private Bilgi Hospital for Orthopedics and Traumatology (Table 28).

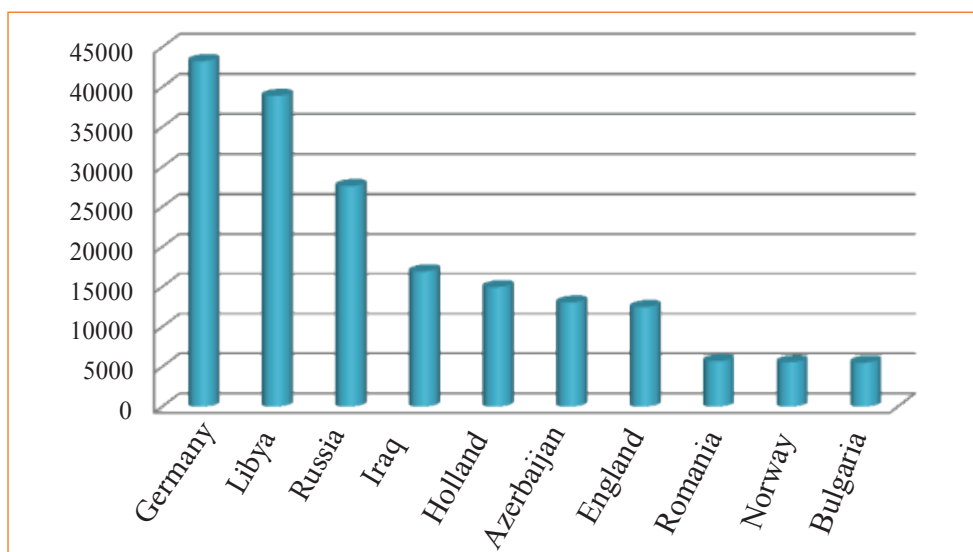
4.5. Distribution of International Patients by Country

Table 29. Top 10 Countries International Patients Come From, 2012

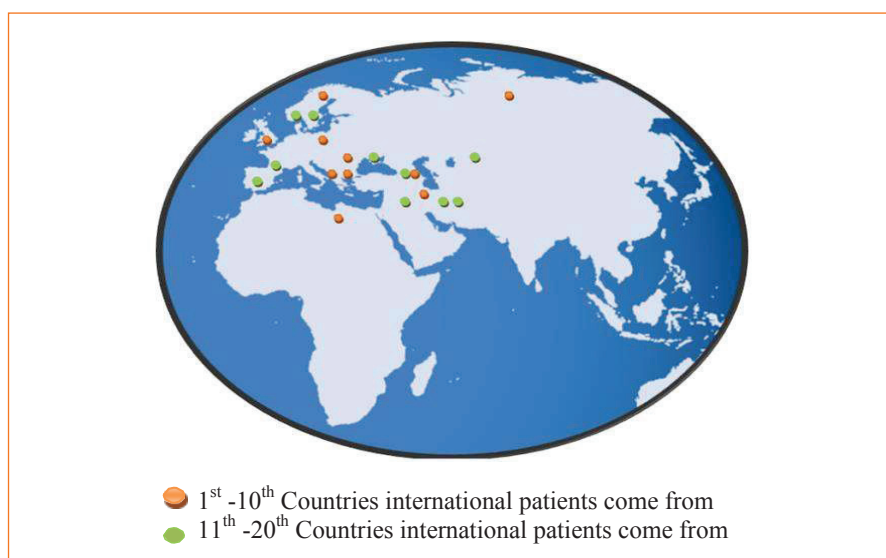
Country	Number
Germany	43259
Libya	38898
Russia	27604
Iraq	16926
Holland	14959
Azerbaijan	13023
England	12456
Romania	5685
Norway	5554
Bulgaria	5511

The list of all countries that international patients come from is given in the APPENDIX 3 and Germany is in the first place among these countries. The fact that the number of patients coming from Germany is high results from expats living in Germany. The other countries are respectively Libya, Russia, Iraq, Holland, Azerbaijan, England, Romania, Norway and Bulgaria (Table 29, Graphic 24 and Map 6).

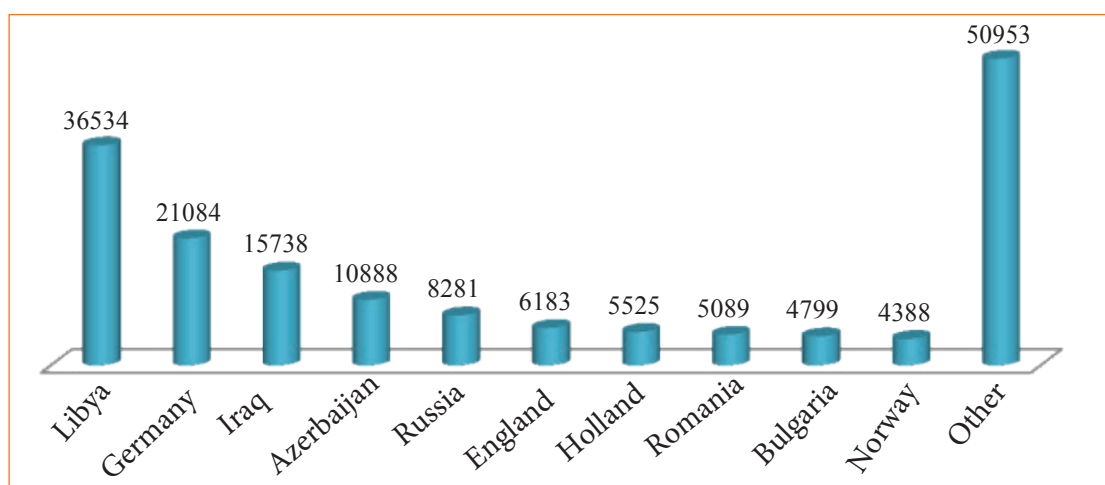
Graphic 24. Top 10 Countries International Patients Come From, 2012



Map 6. Top 20 Countries that International Patients Come From, 2012



Graphic 25. Top 10 Countries Patients Come from under Medical Tourism, 2012

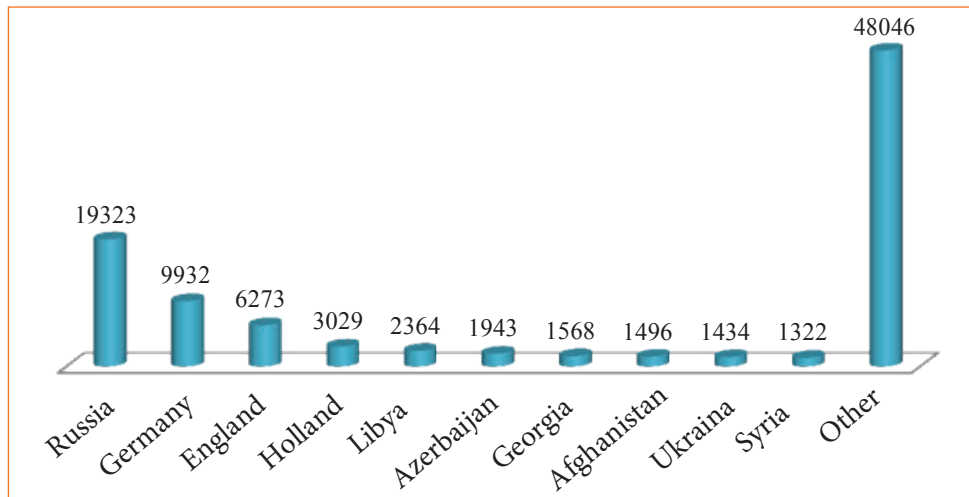


Considering the distribution of patients coming under medical tourism by countries, it is seen that the most preferred 3 countries are Libya, Germany and Iraq (Graphic 25).

As a result of the civil war outbreak in Libya, first, a considerable number of patients and injured Libyan citizens were brought to Turkey and treated for free as part of the close relations between Turkey and Libya. After the end of the civil war in Libya, the newly formed Libyan government undertook that they would bear the expenses of patients sent to Turkey afterwards. In this framework, a high number of medical tourists came from Libya to Turkey as a result of these events.

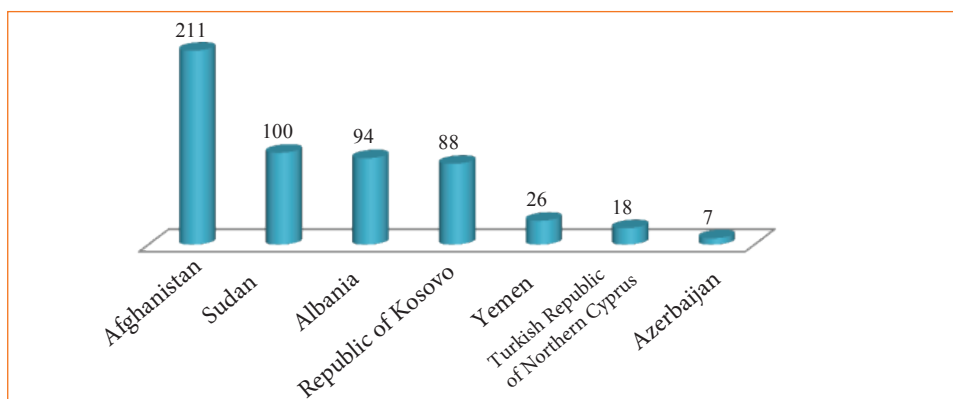
Main reasons why the medical tourists from Germany prefer Turkey are as follows: First, That 4.5 million Turkish citizens reside in Germany could have been an advertising medium for medical tourism. Second, German tourists among the total number of tourists incoming to Turkey in general have an important role. Also, the fact that both government agencies and private health care organizations in Turkey have started serious advertising activities in these countries could be an important parameter.

Graphic 26. Top 10 Countries Patients Come From under Tourist Health, 2012



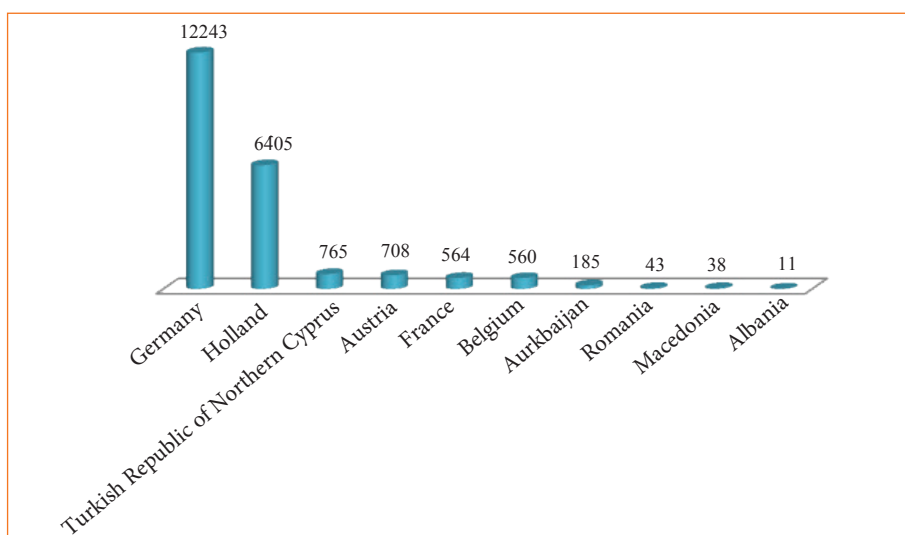
When examining the distribution of patients coming to our health care organizations by the country they come from, it is seen that top 3 countries patients come from are Russia, Germany and England (Graphic 26). According to the data of T.R. Ministry of Culture and Tourism, Germany ranks first by 15.8% (5.028.745), Russia ranks second by 11.3% (3.599.925) and England ranks third by 7.7% (2.456.519) in ranking of the countries sending the highest number of visitors to our country between January-December for the year 2012. England is followed by Bulgaria, Georgia, Holland, Iran, France, United States of America and Syria. Accordingly, it is an expected result that the data of tourist health is high because the highest number of tourists comes from Russia, Germany and England.

Graphic 27. Countries Patients Come From under Bilateral Agreements, 2012



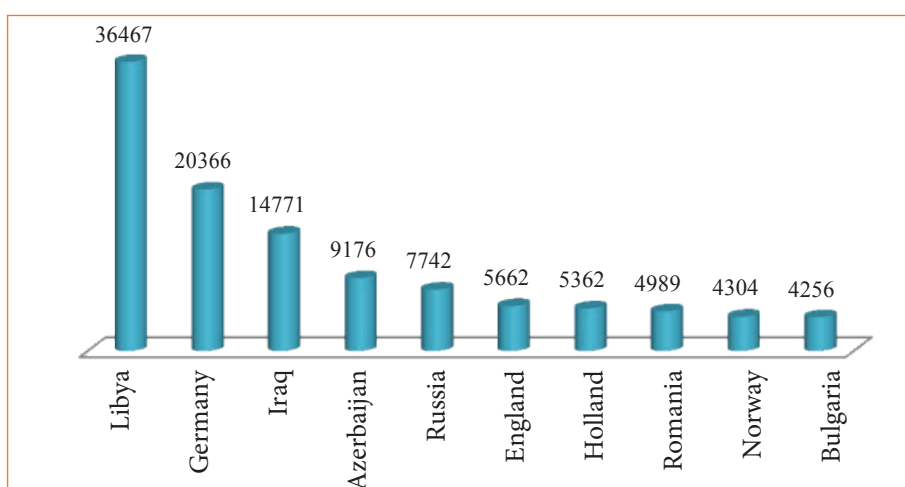
The patients under Bilateral Agreements are respectively Afghanistan, Sudan, Albania, Republic of Kosovo, Yemen, Turkish Republic of Northern Cyprus and Azerbaijan (Graphic 27).

Graphic 28. Top 10 Countries Patients Come From under Social Security Institution, 2012



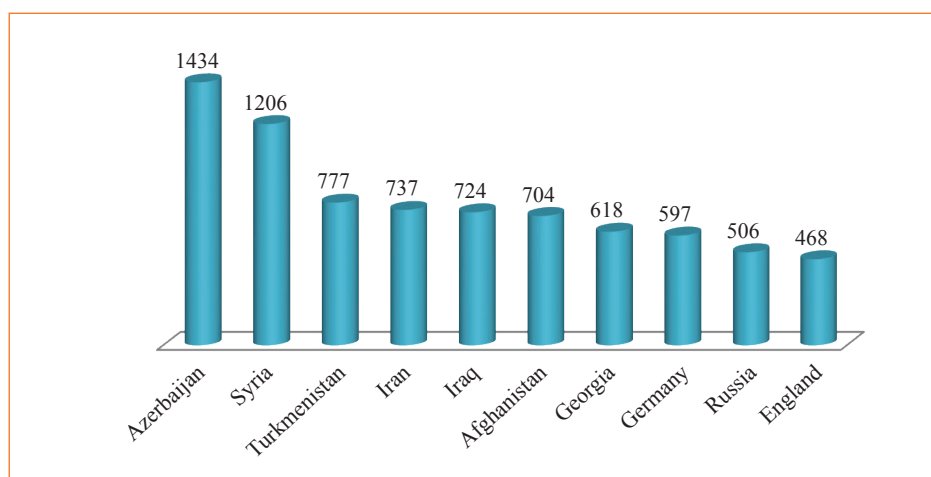
When examining the distribution of the countries patients under Social Security Institution come from, it is seen that Germany and Holland are in the first place (Graphic 28).

Graphic 29. Number of Patients Going to Private Hospitals by Country under Medical Tourism (Top 10 Countries), 2012



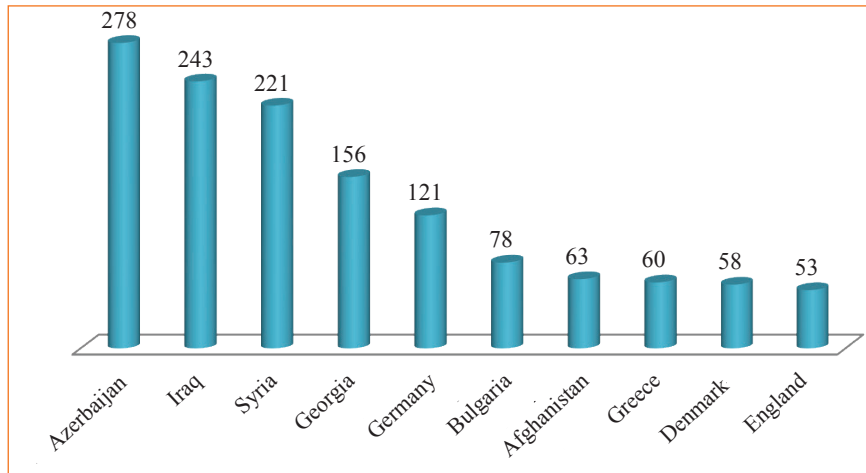
The medical tourists going to private hospitals in 2012 came from Libya, Germany, Iraq, Azerbaijan and Russia the most (Graphic 29).

Graphic 30. Number of Patients Going to Public Hospitals by Country under Medical Tourism (Top 10 Countries), 2012



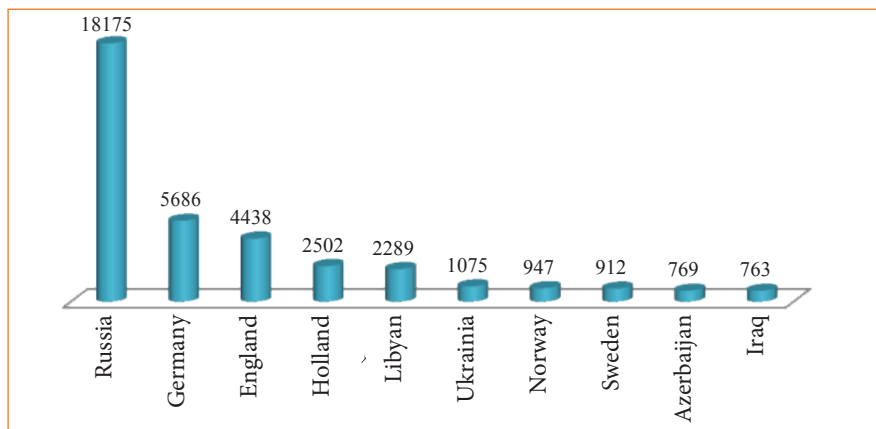
When examining the number of patients going to public hospitals by countries under medical tourism, it is seen that Azerbaijan, Syria and Iraq are in the first 3 places (Graphic 30). Syria is one of the top countries because the majority of the patients coming from Syria are refugees.

Graphic 31. Number of Patients Going to University Hospitals by Country under Medical Tourism (Top 10 Countries), 2012



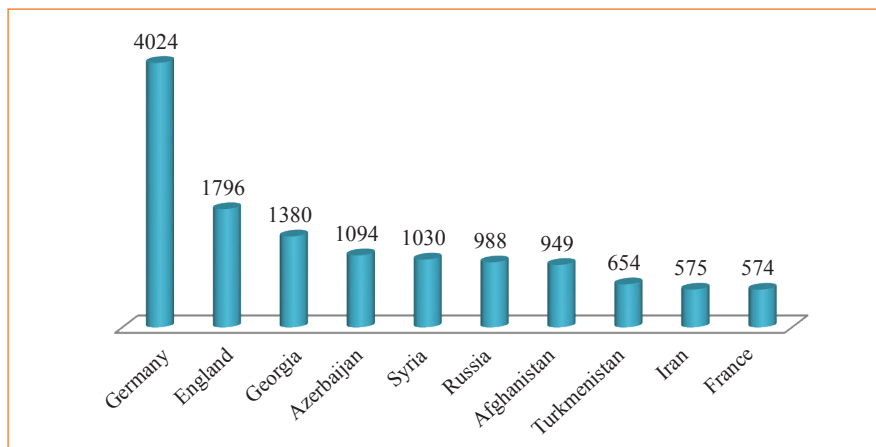
University hospitals are preferred by medical tourists coming from Azerbaijan, Iraq and Syria the most (Graphic 31).

Graphic 32. Number of Patients Going to Private Hospitals by Country under Tourist Health (top 10 Countries), 2012



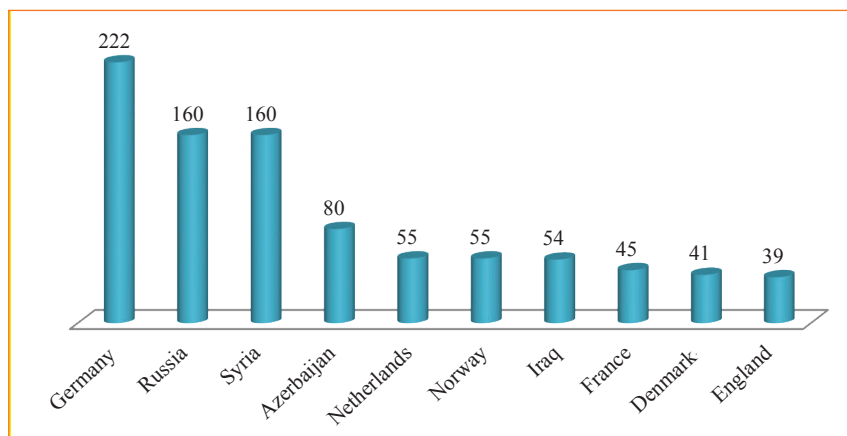
The majority of patients receiving service under tourist health come from Russia, Germany, England, Holland and Libya (Graphic 32).

Graphic 33. Number of Patients Going to Public Hospitals by Country under Tourist Health (top 10 Countries), 2012



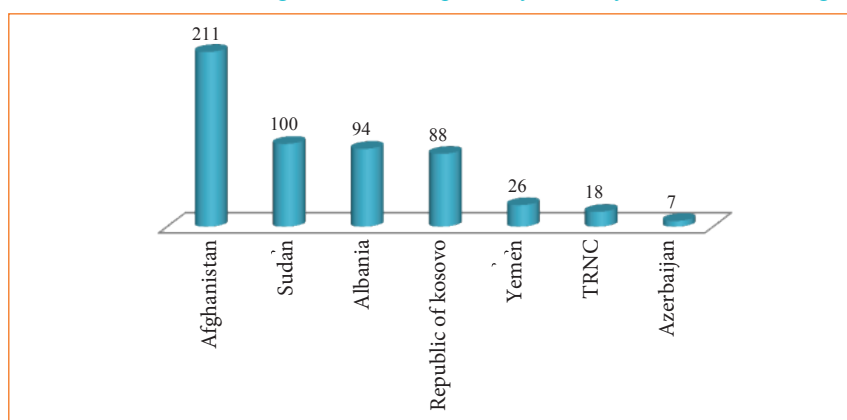
When examining the number of patients going to public hospitals by countries under tourist health, it is seen that Germany, England and Georgia are in the first 3 places in 2012 (Graphic 33).

Graphic 34. Number of Patients Going to University Hospitals by Country under Tourist Health (top 10 Countries), 2012



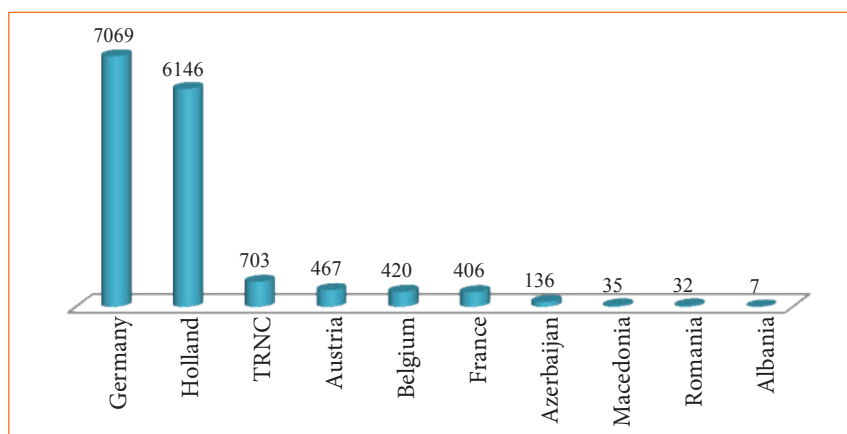
When examining the number of patients going to university hospitals under tourist health, it is seen that Germany, Russia and Syria are in the first 3 places (Graphic 34).

Graphic 35. Number of Patients Going to Public Hospitals by Country under Bilateral Agreements, 2012



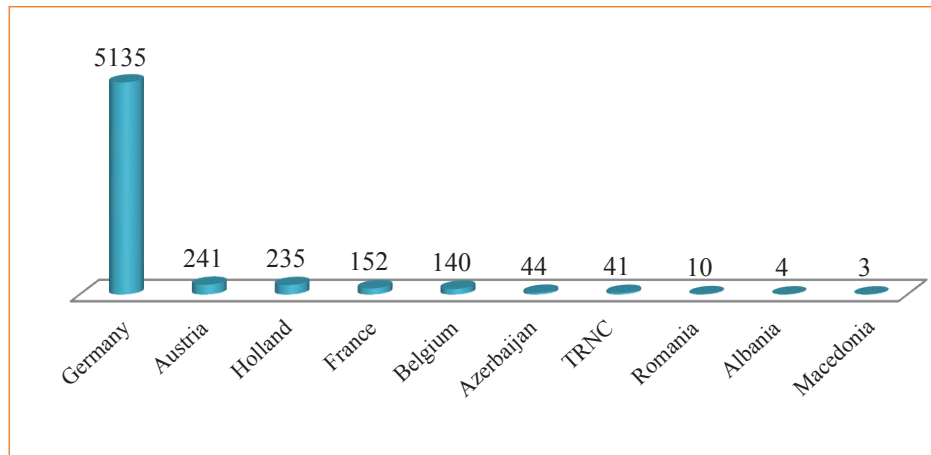
It is not possible to go to private hospitals under Bilateral Agreements. Almost the whole of patients under Bilateral Agreements (534 patients) go to Education and Research Hospitals. The majority of them consist of the patients coming from Afghanistan. 8 patients preferred state hospitals. 6 of them come from Albania, 1 patient from Azerbaijan and the other from Yemen (Graphic 35). The number of patients going to university hospitals is 2 only and these patients come from Sudan.

Graphic 36. Number of Patients Going to Private Hospitals under Social Security Institution by Country (top 10 countries), 2012



The majority of patients coming to private hospitals under Social Security come from Germany and Holland (Graphic 36).

Graphic 37. Number of Patients Going to Public Hospitals under Social Security Institution by Country (top 10 Countries), 2012



The majority of patients going to public hospitals under Social Security come from Germany (Graphic 37). The majority of patients going to university hospitals under Social Security come from Germany (39 patients), Holland (24 patients) and TRNC (21 patients), respectively.

Table 30. Medical Tourism – Number of Patients by Country and Type of Hospital (top 10 Countries), 2012

Country	Type of Hospital					Total
	State Hospital	Training and Research Hospital	Private Hospital	State University Hospital	Private University Hospital	
Libya	11	50	36467	6	0	36534
Germany	516	81	20366	74	47	21084
Iraq	367	357	14771	229	14	15738
Azerbaijan	529	905	9176	263	15	10888
Russia	287	219	7742	27	6	8281
England	419	49	5662	36	17	6183
Holland	118	11	5362	8	26	5525
Romania	69	23	4989	4	4	5089
Bulgaria	315	150	4256	73	5	4799
Norway	40	8	4304	2	34	4388

Considering the distribution of patients preferring out hospitals under medical tourism, it is seen that the patients coming from all the countries in the top 10 mostly prefer private hospitals (Table 30).

Table 31. Tourist Health-Number of Patients by Country and Type of Hospital (Top 10 Countries), 2012

Country	Type of Hospital					Total
	State Hospital	Training and Research Hospital	Private Hospital	State University Hospital	Private University Hospital	
Russia	738	250	18175	155	5	19323
Germany	2955	1069	5686	152	70	9932
England	1727	69	4438	30	9	6273
Holland	425	47	2502	25	30	3029
Libya	21	45	2289	9	0	2364
Azerbaijan	653	441	769	77	3	1943
Georgia	1080	300	153	33	2	1568
Afghanistan	765	184	519	19	9	1496
Ukraine	229	125	1075	4	1	1434
Syria	813	217	132	158	2	1322

Considering the distribution of patients coming to our hospitals under tourist health, it is seen that the tourists coming from the countries other than Georgia, Afghanistan and Syria which are among the top 10 mostly prefer private hospitals; and those coming from Georgia, Afghanistan and Syria mostly prefer state hospitals (Table 31).

Table 32. Patients under Bilateral Agreements-Number of Patients by Country and Type of Hospital, 2012

Country	Type of Hospital				Total
	State Hospital	Training and Research Hospital	State University Hospital	Private University Hospital	
Afghanistan	0	211	0	0	211
Sudan	0	98	2	0	100
Albania	6	88	0	0	94
Republic of Kosovo	0	88	0	0	88
Yemen	1	25	0	0	26
Turkish Republic of Northern Cyprus	0	18	0	0	18
Azerbaijan	1	6	0	0	7

Considering the distribution of patients coming to our hospitals under Bilateral Agreements, it is seen that almost the whole of patients coming from all the countries prefer training and research hospitals (Table 32).

Table 33. Patients Coming under Agreement with Social Security Institution-Number of Patients by Country and Type of Hospital, 2012

Country	Type of Hospital					Total
	State Hospital	Training and Research Hospital	Private Hospital	State University Hospital	Private University Hospital	
Germany	2673	2462	7069	30	9	12243
Holland	214	21	6146	22	2	6405
Turkish Republic of Northern Cyprus	24	17	703	21	0	765
Austria	173	68	467	0	0	708
France	137	15	406	5	1	564
Belgium	82	58	420	0	0	560
Azerbaijan	12	32	136	5	0	185
Romania	6	4	32	1	0	43
Macedonia	2	1	35	0	0	38
Albania	4	0	7	0	0	11

When examining the distribution of the patients coming to our hospitals under Agreement with Social Security Institution, it is seen that the patients coming from all the countries mostly prefer private hospitals (Table 33).

Table 34. Medical Tourism– Distribution of Top 10 Countries and Top 10 Clinics, 2012

Clinics	Country										Total
	Germany	Azerbaijan	Bulgaria	Holland	England	Iraq	Libya	Norway	Romania	Russia	
Eye Diseases	3749	1670	348	504	642	1999	4618	471	213	440	14654
Orthopedics and Traumatology	2674	449	159	660	780	1211	5521	366	162	1106	13088
Internal Diseases	3057	811	240	949	990	1057	2627	783	184	849	11547
Ear, Nose, Throat Diseases	2598	501	105	848	510	674	3370	540	187	797	10130
General Surgery	1613	659	183	428	611	666	1683	266	326	709	7144
Gynecology and Obstetrics	534	1440	377	257	307	736	1340	80	407	1494	6972
Mouth, Dental and Maxillofacial Diseases and Surgery	899	144	204	317	397	257	2798	1134	35	483	6668
Brain and Nerve Surgery	884	309	119	222	222	1324	1624	170	118	322	5314
Medical Oncology	57	534	1489	23	8	377	321	0	1748	180	4737
Dermatology and Venereal Diseases	229	410	80	102	211	402	2446	90	86	329	4385

Considering the distribution of the patients coming under medical tourism by top 10 countries and top 10 clinics, it is found that the highest number of patients for Eye Diseases, Orthopedics and Traumatology, Ear, Nose, Throat Diseases, General Surgery, Mouth, Dental and Maxillofacial Diseases and Surgery, Brain and Nerve Surgery, Dermatology and Venereal Diseases from Libya; for Internal Diseases from Germany, for Gynecology and Obstetrics from Russia and for Medical Oncology from Romania (Table 34).

Table 35. Tourist Health – Top 10 Countries and Clinics, 2012

Clinics	Country										Total
	Afghanistan	Germany	Azerbaijan	Georgia	Holland	England	Libya	Russia	Syria	Ukraine	
Emergency Medicine	1433	7551	1643	1461	2518	4993	1611	16829	1293	1249	40581
Pediatrics and Diseases	15	2107	115	20	366	309	109	2329	8	131	5509
Family Medicine	19	123	67	29	113	884	529	79	4	21	1868
Infectious Diseases	17	131	83	48	29	80	98	72	11	24	593
Radiology and Medical Laboratory	12	19	35	10	3	7	17	13	6	9	131

When examining the distribution of the patients preferring our health care organizations under tourist health by top 10 countries and clinics, it is found that the tourists from Russia mostly prefer Emergency Medicine, Pediatrics and Diseases, tourists from England mostly prefer Family Medicine, tourists from Germany mostly prefer Infectious Diseases, those from Azerbaijan mostly prefer Radiology and Medical Laboratory (Table 35).

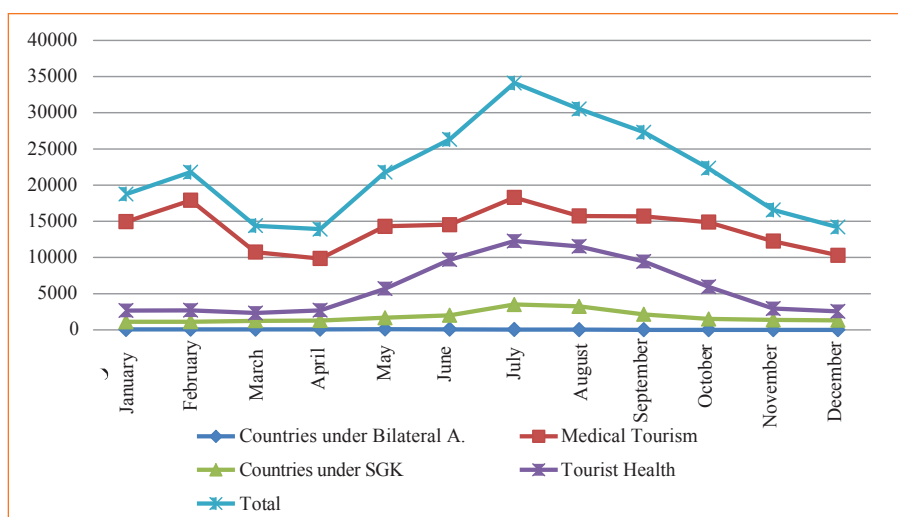
4.6. Distribution of International Patients by Month

Table 36. Number of International Patients Receiving Health Care Services in Turkey by Month, 2012

Months	How Patients Come								Total	
	Countries with Bilateral Agreements		Medical Tourism		Countries Under SGK Agreement		Tourist Health			
	Num.	Percen.	Num.	Percen.	Num.	Percen.	Num.	Percen.	Num.	Percen.
January	56	10,3	14941	8,8	1106	5,1	2660	3,8	18763	7,2
February	80	14,7	17907	10,6	1116	5,2	2694	3,8	21797	8,3
March	68	12,5	10742	6,3	1257	5,8	2329	3,3	14396	5,5
April	70	12,9	9862	5,8	1292	6,0	2695	3,8	13919	5,3
May	108	19,9	14309	8,4	1660	7,7	5691	8,1	21768	8,3
June	75	13,8	14538	8,6	2016	9,4	9691	13,8	26315	10,0
July	34	6,3	18298	10,8	3505	16,3	12271	17,4	34108	13,0
August	17	3,1	15729	9,3	3247	15,1	11529	16,4	30522	11,6
September	10	1,8	15699	9,3	2147	10,0	9455	13,4	27311	10,4
October	8	1,5	14881	8,8	1494	6,9	5950	8,4	22341	8,5
November	8	1,5	12249	7,2	1367	6,3	2945	4,2	16569	6,3
December	10	1,8	10307	6,1	1323	6,1	2553	3,6	14193	5,4
Total	544	100,0	169462	100,0	21530	100,0	70463	100,0	261999	100,0

Considering the manner of coming of patients applying for receiving services in Turkey by months, it is seen that the patients from the Countries under Bilateral Agreements come in May the most, the patients under Medical Tourism come in July the most, the patients from the Countries under Social Security Institution come in July the most and the patients under Tourist Health come in July the most (Table 36 and Graphic 38). These results show that the patients coming from the countries prefer summer months mostly for treatment purposes.

Graphic 38. Distribution of International Patients Receiving Health Care Services in Turkey by Month, 2012



However the percentage distribution of international patients by month is similar to the percentage distribution of the number of tourists visiting our country (Graphic 39), an increase is seen in January and February. According to the data of T.R. Ministry of Culture and Tourism, the distribution of the tourists by months in 2012 is shown in the Table 37 and Graphic 39.

Table 37. Distribution of the Number of Tourists Visiting Turkey by Month, 2012

Month	Number of Tourists	Percentage
January	981.611	3,1
February	997.571	3,1
March	1.460.563	4,6
April	2.168.715	6,8
May	3.232.926	10,2
June	3.882.592	12,2
July	4.571.389	14,4
August	4.470.202	14,1
September	3.991.415	12,6
October	3.050.981	9,6
November	1.631.647	5,1
December	1.343.220	4,2
Total	31.782.832	100,0

Graphic 39. Distribution of Tourists and International Patients Visiting Turkey by Month, 2012

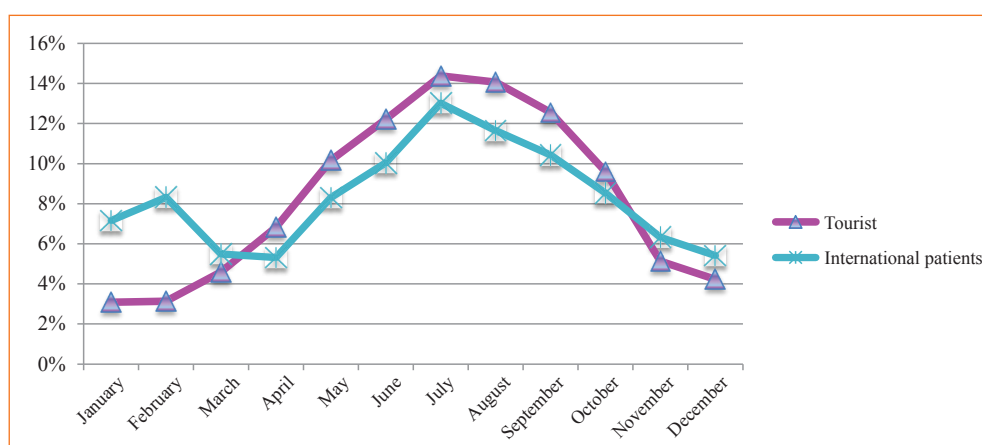


Table 38. Top 10 Clinics Patients Prefer under Medical Tourism by Month, 2012

Clinics	Months												Total
	January	February	March	April	May	June	July	August	September	October	November	December	
Eye Diseases	2342	2864	1335	1322	1687	1650	1864	1520	1448	1461	1760	1569	20822
Orthopedics and Traumatology	1696	2222	1032	936	1446	1556	1888	1698	1682	1629	988	725	17498
Internal Diseases	1051	1345	979	929	1378	1445	2193	1942	2132	1906	937	742	16979
Ear, Nose Throat Diseases	1137	1387	696	590	855	1293	2611	2217	1215	1040	677	582	14300
Gynecology and Obstetrics	973	1129	978	951	1170	1261	1450	1287	1351	1278	1297	1166	14291
General Surgery	670	791	544	562	885	1011	1413	1280	1096	926	618	470	10266
Mouth, Dental and Maxillofacial Diseases and Surgery	1063	1351	655	504	888	864	888	685	862	813	723	612	9908
Brain and Nerve Surgery	590	638	394	343	567	572	802	643	661	663	487	353	6713
Dermatology and Venereal Diseases	750	1060	503	372	497	530	626	504	512	444	391	356	6545
Pediatrics and Diseases	407	375	347	369	490	634	675	607	604	496	521	478	6003

When examining the distribution of patients coming under medical tourism by months based on clinics, it is found that the patients come for Eye Diseases, Orthopedics and Traumatology, Mouth, Dental and Maxillofacial Diseases and Surgery, Dermatological and Venereal Diseases in February the most; for Internal Diseases, Ear, Nose, Throat, Gynecology and Obstetrics, General Surgery, Brain and Nerve Surgery and Pediatrics and Diseases in July the most. In this case, the patients applied for the top 10 clinics in July and February the most (Table 38)

Table 39. Top 5 Clinics Patients Apply for under Tourist Health by Month, 2012

Clinics	Month												Total
	January	February	March	April	May	June	July	August	September	October	November	December	
Emergency Med.	2172	1840	2022	2290	4777	8086	9838	9564	7692	4512	2565	2253	57611
Pediatrics and Diseases	112	110	164	242	588	1234	1944	1492	1334	1048	197	122	8587
Family Medicine	276	642	68	89	211	258	337	349	315	233	75	71	2924
Infectious Diseases	89	83	56	56	98	94	118	79	88	115	72	74	1022
Radiology and Medical Laboratory	11	19	19	18	16	17	26	43	25	50	36	33	313

When examining the distribution of the patients receiving service under tourist health based on clinic by months, it is found that the patients come for Emergency Medicine, Pediatrics and Diseases, Infectious Diseases in July the most; for Family Medicine in February the most; for Radiology and Medical Laboratory in October the most (Table 39).

Table 40. Top 10 Clinics Patients under Bilateral Agreement Come to by Month, 2012

Clinics	Month												Total
	January	February	March	April	May	June	July	August	September	October	November	December	
Cardiology	8	15	23	6	21	13	5	1	1	1	0	2	96
Cardiovascular Surgery	6	2	8	10	28	9	1	1	0	2	2	0	69
Brain and Nerve Surgery	4	10	5	5	12	11	5	2	4	0	1	3	62
Orthopedics and Traumatology	3	9	6	7	11	9	3	1	1	0	0	0	50
Pediatrics and Diseases	6	15	2	12	3	1	0	0	1	0	0	2	42
Eye Diseases	11	4	2	5	6	2	1	1	0	0	1	0	33
Hematology	2	2	4	5	3	3	0	3	0	0	0	1	23
Urology	3	2	6	4	3	1	1	0	0	0	1	0	21
Medical Oncology	5	7	1	1	2	1	1	1	1	0	0	0	20
General Surgery	1	0	3	1	2	5	5	0	0	1	0	0	18

It is found that the patients under bilateral agreements on health come for Cardiology and Urology in March the most; for Cardiovascular Surgery, Brain and Nerve Surgery, Orthopedics and Traumatology in May the most; for Pediatrics and Diseases and Medical Oncology in February the most; for Eye Diseases in January the most (Table 40).

Table 41. Top 10 Clinics Patients under Social Security Institution Prefer by Month, 2012

Clinics	Month												Total
	January	February	March	April	May	June	July	August	September	October	November	December	
Eye Diseases	236	294	243	249	326	300	517	464	291	221	291	342	3774
Internal Diseases	123	135	138	140	208	258	420	431	284	165	137	103	2542
Pediatrics and Diseases	53	40	59	86	80	165	506	402	195	105	63	87	1841
Orthopedics and Traumatology	52	57	83	88	137	149	296	292	216	116	94	72	1652
Ear Nose Throat Diseases	54	48	60	65	84	113	316	305	156	79	63	91	1434
Cardiology	57	64	86	65	103	136	166	146	124	128	91	61	1227
General Surgery	61	45	59	54	68	91	209	197	113	50	47	47	1041
Nephrology	54	32	59	58	88	122	88	96	90	85	71	49	892
Dermatology and Venereal Diseases	48	31	43	51	58	88	163	142	85	67	57	51	884
Gynecology and Obstetrics	35	32	33	47	57	65	135	157	94	45	40	47	787

When examining the distribution of the patients under Social Security Institution Based on clinics by month, it is found that the patients mostly prefer July for the top 10 clinics excluding Nephrology; June for Nephrology (Table 41).

4.7. Distribution of International Patients Based on Accreditation Status of Hospitals

Table 42. How International Patients Come Based on Accreditation Status of Hospitals, 2012

How Patients Come	ACCREDITATION STATUS				Total	
	Accredited		Not Accredited			
	Num.	Percen.	Num.	Percen.	Num.	Percen.
Countries under Bilateral Agr.	3	0,6	541	99,4	544	100,0
Medical Tourism	62914	37,1	106548	62,9	169462	100,0
Countries under SGK	3823	17,8	17707	82,2	21530	100,0
Tourist Health	4939	7,0	65524	93,0	70463	100,0
Total	71679	27,4	190320	72,6	261999	100,0

27,4 % of international patients went to the hospitals accredited by Joint Commission International (JCI) and 72,6 of them went to the hospitals not accredited. In other words, it can be said that one out of four international patients preferred accredited hospitals (Table 42). Here, the number of accredited and non - accredited hospitals that were applied to should be taken into account. The number total of hospitals preferred by international patients is 899. Only 33 of them are accredited and the others do not have an international accreditation (JCI) certificate. 33 hospitals having the accreditation certificate received 71679 international patients in total. In this case, the average number of international patients per accredited hospital is 2172. The average number calculated in the same way for non-accredited hospitals is 220 (Table 43). The hospitals having an international accreditation certificate attracted 10 times more international patients compared to the hospitals not having this certificate. The most of these patients came under medical tourism.

On the other hand, almost the whole of patients (99,4%), coming from the countries under bilateral agreements (% 99,4), 62,9% of medical tourists, 82,2% of the patients from the countries under Social Security Institution and 93% of the patients coming under tourist health preferred non-accredited hospitals (Table 42).

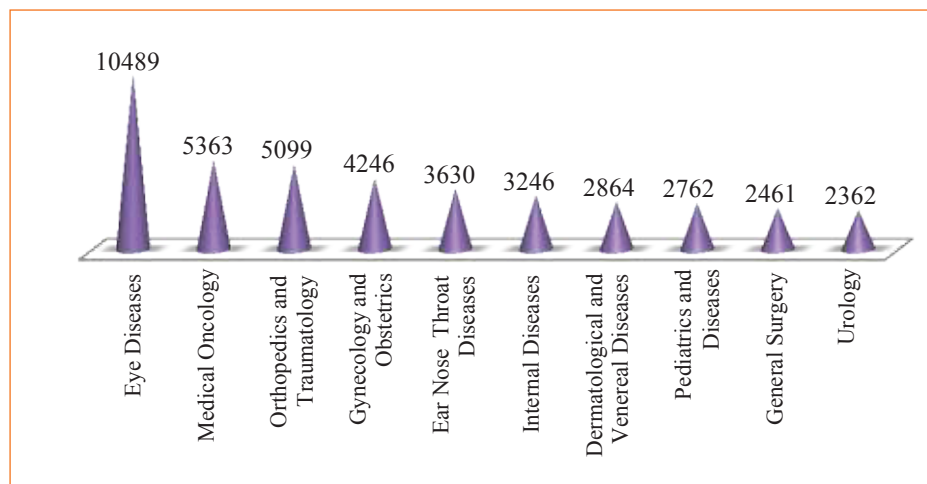
Table 43. Number of Patients based on Accredited and Non-Accredited Hospital, 2012

	Medical Tourism			Tourist Health			Total*	
	Accredited Hospitals	Non-Accredited Hospitals	Total	Accredited Hospitals	Non-Accredited Hospitals	Total	Accredited Hospitals	Non-Accredited Hospitals
Number of Applying Patients	62914	106548	169462	4939	65524	70463	71679	190320
Number of Hospitals Applied	33	755	788	30	601	631	33	866
Number of Patients by Hospital	1906	141	215	164	109	112	2172	220

* The column of Total includes the patients from Countries under Bilateral Agreements and Countries under SGK and the hospitals preferred by these patients.

Considering the top 10 clinics for which the patients under medical tourism go to the accredited hospitals, it is seen that Eye Diseases is in the first place by 10489 patients and this number is quite high compared to the other clinics (Graphic 40).

Graphic 40. Top 10 Clinics for Which Patients under Medical Tourism Prefer the Accredited Hospitals, 2012



However, when examining the top 10 clinics for which the patients under medical tourism go to non-accredited hospitals, Internal Diseases is in the first place with 13733 patients and Orthopedics and Traumatology is in the first place with 12399 patients (Graphic 41).

Graphic 41. Top 10 Clinics for Which Patients under Medical Tourism Prefer the Non- Accredited Hospitals, 2012

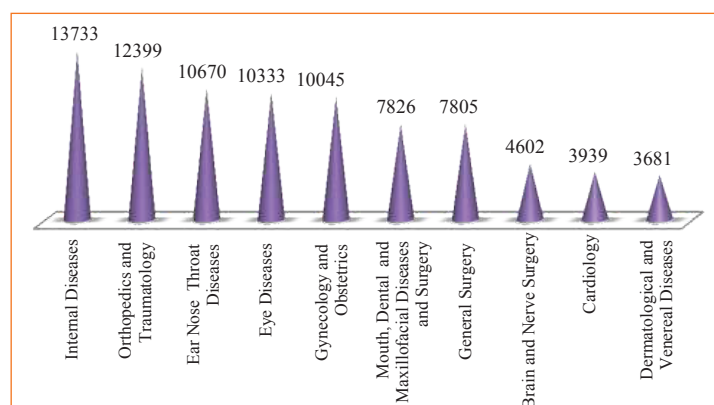
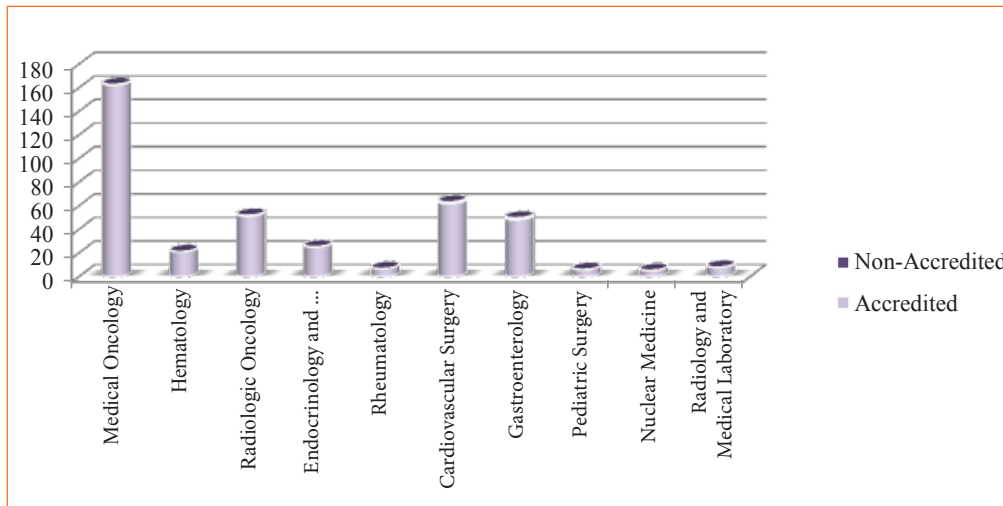


Table 44 and Graphic 42 give the average number of medical tourists per clinic at accredited and non-accredited hospitals. The average number of patients per clinic is found by dividing the total number of patients receiving treatment in that clinic by the total number of hospitals where they are treated. As a result of this, it is seen that the biggest difference between the average number of patients per clinic at the accredited and non-accredited hospitals is in Medical Oncology, Hematology, Radiation Oncology, Endocrinology and Metabolic Diseases and Rheumatology clinics.

Table 44. Average Number of Medical Tourists per Clinic Based on Accreditation Status of Hospitals, 2012

Clinics	Accredited	Not Accredited	Accredited/Not Accredited
Medical Oncology	162,5	0,5	325,0
Hematology	21,2	0,2	106,0
Radiation Oncology	51,5	0,6	85,8
Endocrinology and Metabolic Diseases	25,2	0,3	84,0
Rheumatology	6,9	0,1	69,0
Cardiovascular Surgery	62	1,4	44,3
Gastroenterology	48,4	1,5	32,3
Pediatric Surgery	6,1	0,2	30,5
Nuclear Medicine	5,3	0,2	26,5
Radiology and Medical Laboratory	7,9	0,3	26,3
Eye Diseases	317,8	13,7	23,2
Thoracic Surgery	8,6	0,4	21,5
Physiotherapy and Rehabilitation	50	2,4	20,8
Pediatrics and Diseases	83,7	4,3	19,5
Dermatology and Venereal Diseases	86,8	4,9	17,7
Neurology	51,4	3,0	17,1
Urology	71,6	4,3	16,7
Plastic, Reconstructive and Esthetic Surgery	32,1	2,1	15,3
Chest Diseases	31,7	2,4	13,2
Cardiology	60,8	5,2	11,7
Brain and Nerve Surgery	64	6,1	10,5
Gynecology and Obstetrics	128,7	13,3	9,7
Anesthesiology and Reanimation	5,8	0,6	9,7
Orthopedics and Traumatology	154,5	16,4	9,4
Mental Health and Diseases	5	0,6	8,3
Ear Nose Throat Diseases	110	14,1	7,8
General Surgery	74,6	10,3	7,2
Mouth, Dental and Maxillofacial Diseases and Surgery	63,1	10,4	6,1
Internal Diseases	98,4	18,2	5,4
Nephrology	9	3,0	3,0
Allergic Diseases	0,5	0,3	1,7
Bone Marrow and Organ Transplantation	1,4	0	-

Graphic 42. Average Number of Medical Tourists Per Clinic based on Accreditation Status of Hospitals (Top 10 Clinics), 2012



4.8. Distribution of International Patients by Group Hospital

Table 45. Distribution of Patients Preferring Group Hospitals by How They Come, 2012

Group Hospitals	How Patients Come				Total	
	Medical Tourism	Countries under SGK contractual	Tourist Health	Countries under Bilateral Ag.	Number Patients	Number Hospitals
Bayındır Group of Hospitals	7569	73	705	0	8347	3
Private Hospitadent Oral and Dental Health Centers	115	73	2	0	190	4
Private Medicana Hospitals	6599	190	324	0	7113	6
Private Medline Hospitals	1935	67	1187	0	3189	6
Private Universal Hospitals	2428	29	194	0	2651	7
Private Medical Park Hospitals	21728	2568	2497	0	26793	15
Private World Eye Hospitals	8029	2134	165	0	10328	13
Private Acıbadem Hospitals	17584	231	2054	0	19869	15
Total of Group Hospitals	65987	5365	7128	0	78480	69
Other Hospitals	103475	16165	63335	544	182975	830
General Total	169462	21530	70463	544	261999	899

8 group hospitals consisting of three or more hospitals in Turkey receive international patients as from 2012. 69 hospitals in total under these 8 groups received 78.480 patients in 2012 (Table 45). Accordingly, 30% of international patients (78.480/261.999) preferred group hospitals. 84% of the patients preferring group hospitals come under medical tourism, only 9% came under tourist health and 7% came from the countries under Social Security Institution.

39% of 169.462 medical tourists visiting Turkey in 2012, 25% (5.365) of 21.530 patients coming from the countries under Social Security Institution and 10% (7.128) of 70.463 patients coming under tourist health preferred group hospitals.

It is thought that the reason why one out of three international patients receiving health care services in Turkey prefers group hospitals is that these hospitals bear a brand value and carry out advertising activities for health tourism. Furthermore, 15 of 69 group hospitals have JCI accreditation.

Note: The entries made by hospitals into the web registration system of the Ministry of Health are based on. There might be possible missing patient records.

Table 46. Medical Tourism-Number of Patients Going to Hospitals by Clinic, 2012

Clinics	Group Hospitals (69 hospitals)		All Other Hospitals (830 hospitals)		Number of Patients per Group Hospital/ Number of Patients per Group Hospital per Non-Group Hospital
	Total Number of Patients	Number of Patients per Hospital	Total Number of Patients	Number of Patients per Hospital	
Rheumatology	225	3,3	56	0,1	33,0
Eye Diseases	14326	207,6	6496	7,8	26,6
Physiotherapy and Rehabilitation	2116	30,7	1368	1,6	19,2
Endocrinology and Metabolic Diseases	618	9,0	456	0,5	18,0
Plastic, Reconstructive and Esthetic Surgery	1581	22,9	1085	1,3	17,6
Dermatology and Venereal	3599	52,2	2946	3,5	14,9
Gastroenterology	1490	21,6	1267	1,5	14,4
Pediatrics and Diseases	2947	42,7	3056	3,7	11,5
Radiation Oncology	1010	14,6	1107	1,3	11,2
Urology	2538	36,8	3037	3,7	9,9
Other	35537	515,0	82601	99,5	5,2
Total	65987	956,3	103475	124,7	7,7

Group hospitals are preferred the most for Rheumatology compared to all other hospitals in terms of the number of patients per hospital, and it is followed by Eye Diseases and Physiotherapy and Rehabilitation. When evaluating the all clinics, group hospitals are preferred 8 times the other hospitals (Table 46).

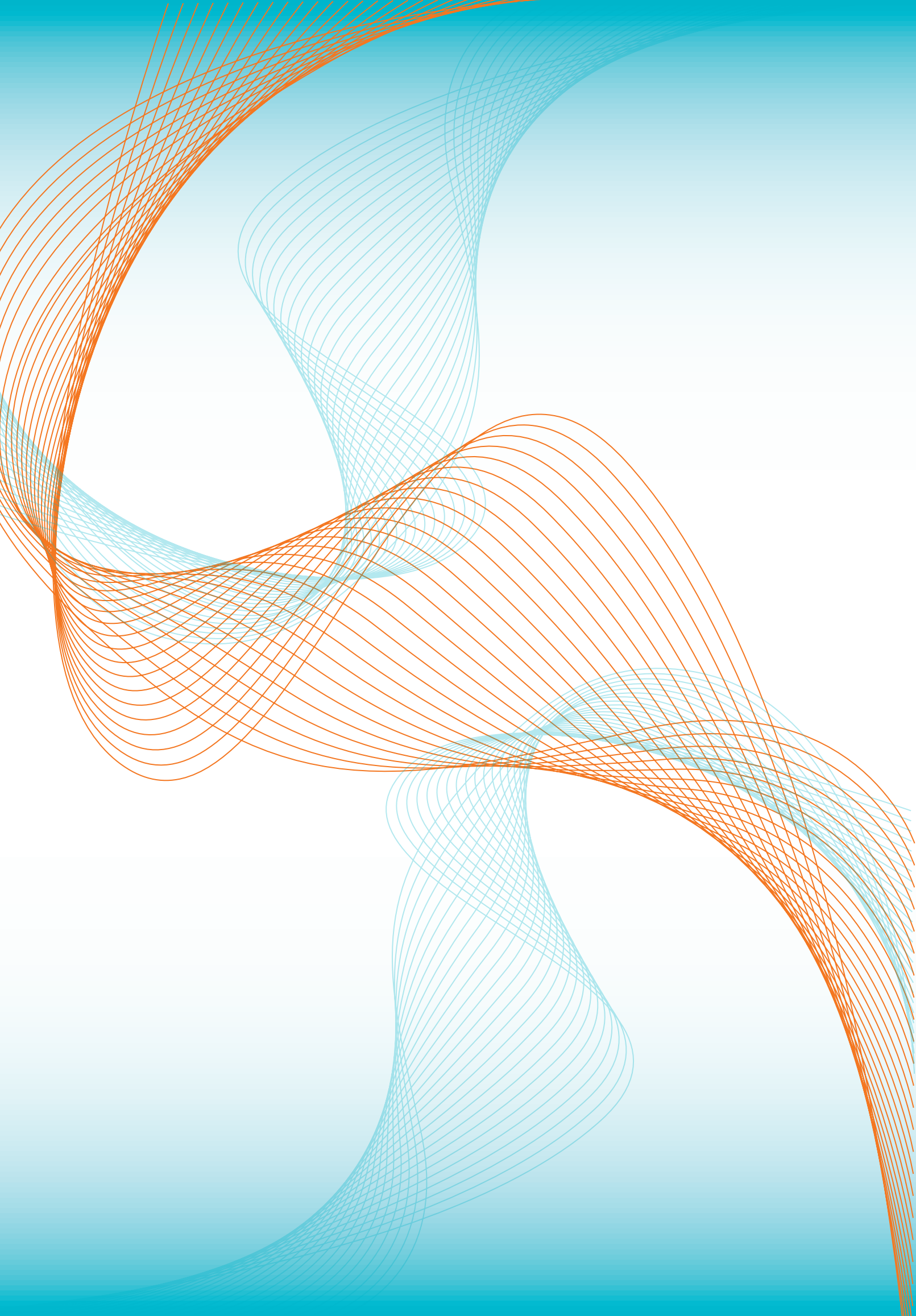
4.9. Incomes Gained from International Patients

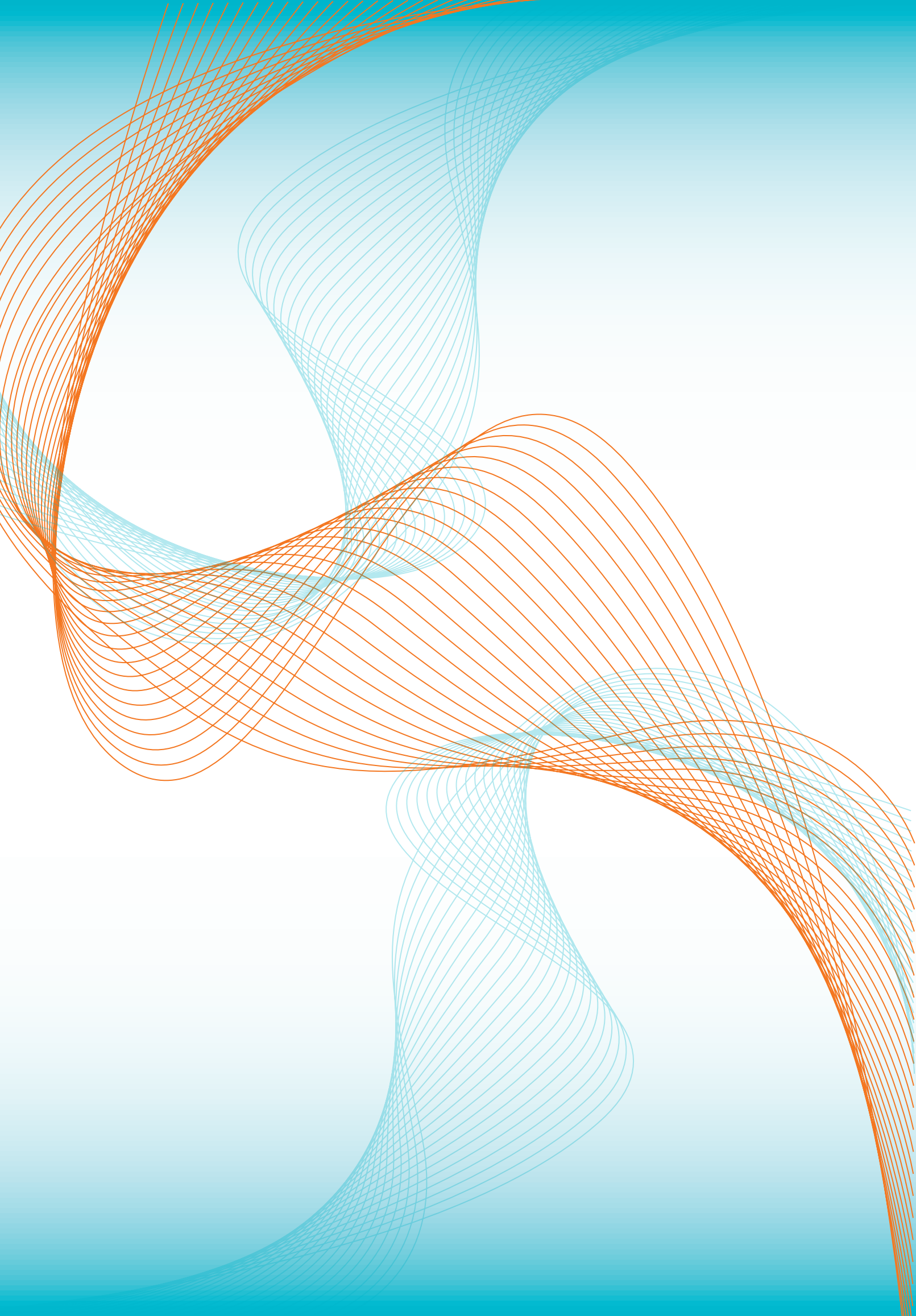
Table 47. Medical Tourism and Tourist Health – Estimated Incomes of Public and Private Sectors for the Year 2012

		Year 2012		
		Number of Patients	Income per Patient USD	Total Income USD
Medical Tourism	Public	14.766	9.000	132.894.000
	Private	154.696	12.000	1.856.352.000
Tourist Health	Public	22.491	2.000	44.982.000
	Private	47.972	4.000	191.888.000
Total		239.925		2.226.116.000

Table 47 gives the estimated incomes gained by private and public sectors under medical tourism and tourist health for the year 2012. The incomes are calculated in average by the Ministry of Health based on the prices of the selected transactions planned to be offered under medical tourism and tourist health at public health care organizations pursuant to the Circular Letter numbered 2011/41 of the Ministry of Health and considering the incomes of the public and private sectors.

In the 10th Development Plan prepared by the T.R. Ministry of Development and published in the Official Journal dated July 6, 2013, it is estimated that 750.000 medical tourist will visit our country and an income of 5,6 billion dollars will be gained in 2018. Accordingly, it is also estimated that the health tourism incomes will approximately increase by 3 times in 2018.





5. CONCLUSION AND RECOMMENDATIONS

This study has aimed to analyze and report international patients who receive health care services in Turkey in terms of their home countries, cities, months, hospitals, clinics, etc., and in this context, to present the current status of Turkey regarding medical tourism and to make recommendations to lead the policies to be formed with regard to medical tourism. In line with this purpose, the following conclusion and recommendations are set forth in the light of the findings obtained from the analysis part of this study.

An evaluation in the framework of the “international patient” concept has been made for the first time under this report based on the analyses about Medical Tourism in Turkey and the “international patient concept “ has been analyzed under four sub-components. They are; patients under medical tourism, patients under tourist health, patients from the countries under bilateral agreements and patients from the countries under Social Security Institution. Having this specific feature, this report differs from the reports generated in 201 and 2012. Furthermore, the preferences of international patients have been discussed based on the status of accreditation and group hospitals for the first time.

As is specified previously, this report is based on the analyzing and interpretation of the data gathered under “Foreign Patient Registration System (YHKS)” of the Ministry of Health. However, although YHKS has been constantly improved since it was established, it is not complete and reliable due to ordinary reasons such as failure of entering data entries carefully. This does not allow for more detailed and more comprehensive analyses. The Registration System should be designed so as to allow for reliable data entries within the context of the four sub-components specified. At the same time, necessary measures should be taken for making data entries correctly. Otherwise, it would not be possible to make right decisions, to produce and implement right policies regarding international patient mobility.

Also, in addition to the international patient data, the tourism records for thermal tourism, elderly tourism and disabled tourism which are the other fields forming health tourism should be correctly kept and presented in integration in order to view the health tourism sector in a holistic manner in the following analyses and reports.

Considering the international patient clustering and mapping resulting from the analysis of international patient data of Turkey for the year 2012; it is seen that the traditional tourism regions and cities where the infrastructure of health care services is good, which produces health care services at international standards, has a JCI accreditation certificate, where group hospitals are located and the sector of private health care services is clustered, which has direct flights come to the forefront. It is beneficial for the Government authorities to take into account this data in planning and coordinating health tourism, in creating health free zones and in incentives. Moreover, it is recommended that the private sector actors who want to enter to the health tourism sector or to grow in this field should take into consideration these findings and make investment decisions accordingly.

As a result of the findings we have obtained, it is found that the number of international patients receiving health care services in Turkey has been increasing by years. It is identified that these patients mostly prefer private hospitals. It can be said that the private hospitals come to the forefront because they offer higher quality and more competitive services and carry out more advertisings.

In 2012, 261.999 international patients came to Turkey, 169.462 of these patients came to the hospitals as a medical tourist for receiving treatment and the majority of these patient preferred private hospitals the most by 91%.

When evaluating based on cities, international patients preferred the most Antalya which is one of the outstanding places of the world in tourism and Istanbul which has historical artifacts and cultural values, and a great number of private hospitals with high quality and a high brand value. The most important reason for this is that; these are the cities which attract the highest number of tourists and the number of patients coming under tourist health is high. Turkey may ensure worldwide branding in health tourism by further supporting these outstanding cities and making investments.

It is found that the medical tourists and the patients coming from the countries under Social Security Institution preferred the Eye clinic, the patients coming under tourist health preferred the Emergency Medicine clinic and the patients coming from the countries under bilateral agreements on health preferred the Cardiology clinic the most. While the medical tourists, those receiving services under tourist health and those receiving services in the category of the countries under Social Security Institution mostly preferred private hospitals, almost the whole of the patients receiving services in the category of the countries under bilateral agreements preferred training and research hospitals.

In 2012, the medical tourists came from Libya, Germany and Iraq the most, the patients receiving services under tourist health came from Russia, Germany and England the most. In general sense, it is found that the countries preferred the most by international patients are Germany, Libya and Russia. In this case, our country should carry out advertising activities for peripheral countries rather than far countries. The international patients received services in July, August and September the most. One of the interesting findings obtained from this study is that one of every 4 international patients preferred the hospitals accredited by JCI and one of every 3 international patients preferred one of the group hospitals consisting of three or more hospitals.

Finally, Turkey should determine suitable and applicable policies and strategies regarding health tourism in order to further strengthen its position for health tourism. For this, in addition to the Ministry of Health, Ministry of Economics and Ministry of Culture and Tourism; the other organizations relating to health tourism and non-governmental organizations, universities and hospitals should act in unison. A national policy should be set for health tourism and advertising and branding should be considered important.

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7. APPENDIXES

APPENDIX 1. All Cities that International Patients Prefer

Cities	How Patients Come				Total*
	Countries Under Bilateral Agreement	Medical Tourism	Countries under SGK	Tourist Health	
Antalya	0	47649	4498	35020	87167
İstanbul	154	55985	5170	7533	68842
Ankara	390	16596	371	1569	18926
Kocaeli	0	13256	98	747	14101
İzmir	0	8324	1657	3944	13925
Muğla	0	5430	140	7613	13183
Aydın	0	3093	626	3409	7128
Karaman	0	213	3849	528	4590
Adana	0	3459	58	514	4031
Sakarya	0	120	2539	834	3493
Bursa	0	1998	306	992	3296
Gaziantep	0	2198	127	439	2764
Samsun	0	1067	558	195	1820
Mersin	0	819	36	812	1667
Kayseri	0	994	113	41	1148
Erzurum	0	905	13	155	1073
Şanlıurfa	0	582	68	314	964
Trabzon	0	441	3	480	924
Hatay	0	746	58	81	885
Balıkesir	0	355	87	413	855
Yalova	0	625	24	203	852
Konya	0	535	27	259	821
Rize	0	214	3	598	815
Çanakkale	0	338	10	415	763
Batman	0	490	204	31	725
Eskişehir	0	413	151	73	637
Tekirdağ	0	430	19	187	636
Edirne	0	320	16	194	530
Nevşehir	0	77	4	448	529
Mardin	0	277	5	237	519
Kahramanmaraş	0	106	178	197	481
Elazığ	0	43	217	117	377
Kastamonu	0	19	2	335	356
Denizli	0	73	65	204	342
Diyarbakır	0	145	4	146	295

Cities	How Patients Come				Total*
	Countries Under Bilateral Agreement	Medical Tourism	Countries under SGK	Tourist Health	
Ordu	0	95	27	158	280
Kars	0	88	0	171	259
Afyonkarahisar	0	152	16	65	233
Artvin	0	47	2	159	208
Manisa	0	114	6	55	175
Yozgat	0	40	75	51	166
Amasya	0	31	30	89	150
Van	0	114	1	12	127
Muş	0	0	27	88	115
Zonguldak	0	24	21	54	99
Isparta	0	55	7	34	96
Bolu	0	56	0	27	83
Iğdır	0	54	2	16	72
Kırklareli	0	25	0	42	67
Çankırı	0	47	0	2	49
Şırnak	0	10	0	28	38
Çorum	0	21	4	7	32
Karabük	0	31	0	1	32
Sinop	0	3	1	25	29
Sivas	0	9	0	16	25
Kütahya	0	8	4	10	22
Osmaniye	0	12	0	9	21
Hakkari	0	4	0	16	20
Bartın	0	10	0	9	19
Ağrı	0	8	0	7	15
Niğde	0	5	0	8	13
Burdur	0	1	0	10	11
Kırşehir	0	3	0	7	10
Giresun	0	5	1	2	8
Erzincan	0	3	1	1	5
Gümüşhane	0	2	0	3	5
Kırıkkale	0	0	0	3	3
Uşak	0	2	0	0	2
Aksaray	0	1	0	0	1
Bingöl	0	0	0	1	1
Tokat	0	0	1	0	1
Unknown	0	47	0	0	47
Total	544	169462	21530	70463	261999

* Ranking is based on the total column.

APPENDIX 2. All Clinics Preferred by International Patients

Name of Clinic	How Patients Come				Total*
	Countries Under Bilateral Agreement	Medical Tourism	Countries under SGK	Tourist Health	
Emergency Medicine	0	0	0	57611	57611
Eye Diseases	33	20822	3774	2	24631
Internal Diseases	2	16979	2542	0	19523
Orthopedics and Traumatology	50	17498	1652	0	19200
Pediatrics and Diseases	42	6003	1841	8587	16473
Ear, Nose, Throat Diseases	13	14300	1434	0	15747
Gynecology and Obstetrics	9	14291	787	1	15088
General Surgery	18	10266	1041	0	11325
Mouth, Dental and Maxillofacial Diseases and Surgery	0	9908	659	0	10567
Dermatology and Venereal Diseases and Surgery	0	6545	884	0	7429
Brain and Nerve Surgery	62	6713	502	3	7280
Cardiology	96	5947	1227	0	7270
Urology	21	5575	708	0	6304
Medical Oncology	20	5726	120	0	5866
Neurology	12	3955	661	0	4628
Physiotherapy and Rehabilitation	5	3484	676	0	4165
Nephrology	7	2553	892	0	3452
Chest Diseases	1	2824	603	0	3428
Cardiovascular Surgery	69	3139	173	0	3381
Gastroenterology	11	2757	326	0	3094
Family Medicine	0	0	111	2924	3035
Plastic, Reconstructive and Esthetic Surgery	3	2666	108	0	2777
Radiation Oncology	6	2117	16	0	2139
Endocrinology and Metabolic Diseases	2	1074	113	0	1189
Infectious Diseases	0	0	92	1022	1114
Mental Health and Diseases	0	610	280	0	890
Hematology	23	831	14	0	868
Radiology and Medical Laboratory	4	468	21	313	806
Anesthesiology and Reanimation	1	611	52	0	664
Thoracic Surgery	2	577	43	0	622
Pediatric Surgery	6	366	46	0	418
Rheumatology	4	281	114	0	399
Nuclear Medicine	0	296	0	0	296
Allergic Diseases	0	233	18	0	251
Bone Marrow and Organ Transplantation	10	47	0	0	57
Unknown	12	0	0	0	12
Total	544	169462	21530	70463	261999

* Ranking is based on the total column.

APPENDIX 3. All Countries that International Patients Come From

Countries	How Patients Come				Total*
	Countries Under Bilateral Agreement	Medical Tourism	Countries under SGK	Tourist Health	
Germany	0	21084	12243	9932	43259
Libya	0	36534	0	2364	38898
Russian Federation	0	8281	0	19323	27604
Iraq	0	15738	0	1188	16926
Holland	0	5525	6405	3029	14959
Azerbaijan	7	10888	185	1943	13023
England	0	6183	0	6273	12456
Romania	0	5089	43	553	5685
Norway	0	4388	0	1166	5554
Bulgaria	0	4799	0	712	5511
Syria	0	2524	0	1322	3846
Afghanistan	211	2074	0	1496	3781
Georgia	0	2134	0	1568	3702
France	0	1820	564	1283	3667
Sweden	0	2428	0	1158	3586
Denmark	0	2803	0	745	3548
Ukraine	0	2012	0	1434	3446
Kazakhstan	0	2508	0	932	3440
Turkmenistan	0	2420	0	843	3263
Belgium	0	1632	560	823	3015
Iran	0	1801	0	902	2703
Switzerland	0	1597	0	527	2124
Austria	0	811	708	495	2014
United States	0	1567	0	430	1997
American	0	1404	0	481	1885
Uzbekistan	0	1098	0	575	1673
Kirghizstan	0	1019	0	397	1416
Finland	0	1030	0	297	1327
Poland	0	695	0	584	1279
Cyprus	0	1078	0	95	1173
Turkish Republic of Northern Cyprus	18	289	765	69	1141
Greece	0	829	0	267	1096
Saudi Arabia	0	673	0	406	1079
Moldova	0	745	0	307	1052
Italy	0	630	0	375	1005
Australia	0	564	0	317	881
Slovak Republic	0	522	0	328	850
Ireland	0	494	0	310	804
Republic of Kosovo	88	631	0	72	791
Albania	94	577	11	90	772

Countries	How Patients Come				Total*
	Countries Under Bilateral Agreement	Medical Tourism	Countries under SGK	Tourist Health	
Czech Republic	0	416	3	289	708
Turks and Caicos Islands	0	503	0	187	690
Macedonia	0	470	38	106	614
Spain	0	376	0	180	556
Serbia Montenegro	0	307	0	227	534
Somalia	0	169	0	364	533
Canada	0	374	0	148	522
China	0	340	0	178	518
Japan	0	266	0	189	455
Sudan	100	266	0	33	399
South Korea	0	289	0	97	386
Philippines	0	292	0	91	383
Morocco	0	242	0	115	357
Brazil	0	213	0	104	317
Egypt	0	221	0	96	317
Kuwait	0	167	0	149	316
Algeria	0	243	0	68	311
United Arab Emirates	0	207	0	77	284
India	0	215	0	64	279
Belarus	0	174	0	93	267
Nigeria	0	218	0	41	259
Tunisia	0	171	0	76	247
Hungary	0	169	0	76	245
Armenia	0	151	0	88	239
Bosnia- Herzegovina	0	173	1	59	233
Yemen	26	184	0	22	232
Lithuania	0	109	0	95	204
Other	0	3619	137	1740	5363
Total	544	169462	21530	70463	261999

* Ranking is based on the total column.