So until the system and the physicians cooperate and pull that all together, which they've done in some places like the Alberta Bone and Joint Institute, and so on, it's very hard to begin to measure some of these things, let alone how each one of those physicians measures it."

The report indicates explosive demand for services, including a 51% increase (by 22 000 cases) between 1998–2003 in the number of cardiac bypass surgeries and angioplasties; a 30% hike (up 11 340) in knee and hip replacements; and a 32% increase (62 000 cases) in cataract surgeries (Fig. 1).

Overall, the report projects roughly half of all patients wait less than 30 days for non-emergency surgery, with hip and knee replacements taking much longer, typically 3 months. Roughly 10% of all patients wait at least 6 months for treatment.

The report also indicates that queues to see a specialist are typically long. In the case of hip and knee replacement patients, often 30% of the overall wait time is spent waiting for the initial visit with an orthopedic surgeon.

Mike McBane, executive director of the Canadian Health Coalition, a promedicare lobby, expressed concern that the focus on wait times is deflecting attention from needed systemic changes.

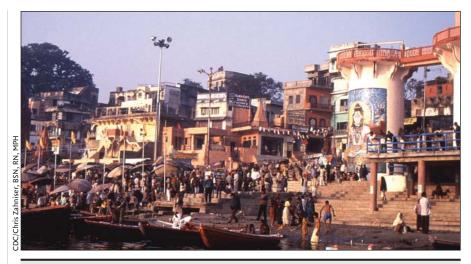
"We're getting a partial picture of less and less," McBane said. "We're going backwards. Instead of moving to reform the system, moving to prevention, moving to home care, we're going back to fixation on a few high tech procedures of acute care. But what about the whole system?" — Wayne Kondro, Ottawa

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## Wait-list weary Canadians seek treatment abroad

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Canadian company that arranges cardiac, orthopedic and cosmetic surgery in India, France and other countries says wait lists at home are driving Canadians' demand for its services.



Medical tourism is increasingly popular in India and other countries, where BC companies are arranging surgeries along with sightseeing for Canadian patients.

MedSolution.com has fielded 2500 inquiries from Canadians interested in private cardiac and joint replacement surgery since it began operating in late 2005, says John Knox, spokesman for the Burnaby, BC-based company.

So-called "medical tourism" is a wellestablished industry in Asia and the UK, but companies promoting it in Canada are relatively new. No statistics on the total number of patients are available.

At press time, MedSolution was in the process of sending 6 US patients to its partner hospitals in India and France for surgery, Knox said. About the same number of Canadian patients were undergoing medical assessments to qualify them for the service.

The companies hook patients up with a hospital and surgeon, arrange for their family doctors to send records and consult with the surgeons overseas, make travel arrangements and book hospital admissions.

India has become a destination of choice because treatment is less expensive than in the US and doctors are often Western-trained, says Knox.

Getting a hip replacement, for example, costs about US\$40 000 in the US, but US\$15 000 in France and US\$6000 in India, Knox says. The company also hopes to expand its partner institutions to hospitals in Malaysia and Costa Rica, among other countries.

Although there is no guarantee that Canadians who have the surgeries performed out of country will be reimbursed by provincial health insurance plans, that is not a major obstacle for MedSolution's clients, says Knox.

"Waiting lists are so out of control in this country, many patients are willing to pay anything to obtain swift access to the services they need," he says. "It's our job to help them find a hospital in a country that suits their personal preferences and their budget."

In one well-publicized case in Alberta, the province reimbursed Aruna Thurairajan of Calgary for the \$3000 she spent having spinal surgery performed in India. The flight cost her an additional \$2000.

"I wasn't even wait-listed" in Canada, says Thurairajan. "I had to beg the surgeons [here] to give me an x-ray and an MRI."

She does not regret her trip and has referred other patients to India, she says. "It's as good as the best hospitals in the US."

Other medical tourism companies in BC, such as Timely Medical Alternatives, arrange surgeries at hospitals in states bordering Canadian provinces. That Vancouver-based company is compensated by the US hospitals for finding Canadian patients.

The company has chosen not to send patients farther afield because of the risk of complications involved for patients flying more than 5000 miles, says Rick Baker, a principal with the private company. — Laura Eggertson, *CMAJ* 

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