

Medical Tourism in the Philippines: Trends, Challenges, and Opportunities from a Decade of Literature Review

Jon Paul M. Reyes*1, Stephanie B. Castillo²

¹Medical Laboratory Science Department, Lyceum of the Philippines University-Batangas,
Batangas City, Philippines

²Hospitality and Tourism Management Department, PHINMA-Rizal College of Laguna,
Laguna, Philippines

*Corresponding Author Email: jonjon100686@gmail.com

Date received: September 20, 2025 Date revised: October 17, 2025 Date accepted: November 5, 2025 Originality: 89% Grammarly Score: 99%

Similarity: 11%

Recommended citation:

Reyes, J.P., & Castillo, S. (2025). Medical tourism in the Philippines: Trends, challenges, and opportunities from a decade of literature review. *Journal of Interdisciplinary Perspectives*, *3*(12), 35-41. https://doi.org/10.69569/jip.2025.687

Abstract. Medical tourism refers to patients traveling abroad to access affordable and high-quality healthcare. This industry has grown quickly in Asia, with the Philippines emerging as a potential hub due to its skilled workforce, competitive prices, and cultural connections to foreign markets. However, compared to regional leaders such as Thailand, India, and Malaysia, the Philippine medical tourism sector remains underdeveloped. There is a noticeable gap in research, as previous studies have not provided a thorough overview of the trends, challenges, and opportunities in the country's medical tourism sector. To address this, a systematic narrative review was conducted in accordance with PRISMA guidelines. It covered literature published from January 2015 to September 2025 across databases such as PubMed/MEDLINE, Scopus, Web of Science, Embase, Google Scholar, and HERDIN, as well as government and industry reports. Out of 1,352 screened records, 59 studies met the inclusion criteria. These included 32 empirical papers, 15 policy analyses, and 12 reviews. The findings showed a growing demand for affordable care, an increase in services aimed at the diaspora, and the rise of telemedicine for ongoing treatment before and after care. Ongoing challenges included fragmented governance, a lack of international accreditation, workforce migration, and pandemicrelated disruptions. However, there are opportunities in niche markets like dental care, cosmetic surgery, wellness, and retirement healthcare. Overall, while the Philippines has significant potential to become a strong player in medical tourism, its progress depends on improving accreditation, governance, retaining healthcare workers, and investing in digital health. Strategic coordination and policy integration are essential to achieving sustainable, fair growth in this developing sector.

Keywords: Healthcare infrastructure; Health policy; Medical tourism; Philippines; Systematic review.

1.0 Introduction

Medical tourism has become a multibillion-dollar global industry, with millions of patients traveling across borders each year to find affordable, high-quality healthcare. This rapid growth is fueled by rising medical costs in developed countries, long waiting times, and greater global mobility (Connell, 2016; Hanefeld et al., 2015). Asian countries such as Thailand, India, Malaysia, and Singapore have taken the lead in this area by combining strong healthcare infrastructure, international accreditation, and government support. In this competitive environment, the Philippines has started to emerge as a potential player, using its cost-effective services, skilled English-speaking health professionals, and growing network of modern hospitals (Ormond & Sulianti, 2017; Yap et al., 2020). The country excels particularly in cosmetic surgery, dental care, cardiovascular procedures, and organ

transplants, attracting patients from the United States, Japan, South Korea, and the Middle East (Johnston et al., 2016; Lee & Hung, 2019). Several hospitals in the Philippines have also earned international accreditation, boosting their credibility among foreign patients.

However, the Philippine medical tourism sector still faces significant challenges. Gaps in infrastructure, limited transport options, and uneven distribution of hospitals restrict accessibility. Workforce migration and ongoing "brain drain" reduce service capacity and continuity of care (Dayrit & Lagrada, 2019). Differences in regulations and fragmented governance make it difficult to coordinate between the health and tourism sectors, while weak global branding limits the country's visibility compared to regional rivals (Smith & Forgione, 2017; Torres & Rollins, 2019). Cultural barriers and ethical issues, such as prioritizing foreign patients over domestic ones, add further complications to sector development (Turner, 2013; Glinos, 2015). The COVID-19 pandemic has also highlighted the industry's fragility, disrupting patient travel and underscoring the need for resilience and digital innovation (Hall, 2020; Pocock & Phua, 2021).

Previous studies on medical tourism have mainly focused on its economic impacts, patient satisfaction, or comparisons of destination countries (Connell, 2016; Herrick, 2019). However, there is limited research on how the Philippines can strengthen its governance, accreditation, and policy frameworks to support growth. Additionally, there is not enough examination of how emerging trends, such as telemedicine, diaspora networks, and digital health after the pandemic, can influence the country's long-term competitiveness.

Furthermore, this study aims to address these gaps through a systematic narrative review of literature published from 2015 to 2025. Specifically, it seeks to (1) map global and local trends in developing Philippine medical tourism, (2) identify key challenges in governance, accreditation, workforce, and ethics, and (3) explore opportunities for growth in the sector through digital innovation, diaspora engagement, and policy integration. By gathering evidence from international and local sources, this review provides a clear perspective to help policymakers, health administrators, and industry leaders create sustainable, fair, and globally competitive medical tourism strategies for the Philippines.

Overall, the 59 studies reveal a mixed reality. The Philippines has clear advantages in affordability, skilled workforce, and cultural connections. However, it is also constrained by weak institutional frameworks, insufficient accreditation, and sensitivity to external shocks. Addressing these issues requires policies that balance economic opportunities with equity, resilience, and sustainability.

2.0 Methodology

2.1 Research Design

This study used a systematic narrative review, which is a method for gathering diverse types of evidence when quantitative meta-analysis is not possible due to differences in study designs and outcomes (Popay et al., 2006). The review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines to ensure clarity and thoroughness. We conducted extensive searches in PubMed/MEDLINE, Scopus, Web of Science, Embase, and Google Scholar to gather international perspectives. To include local insights, we also used the Health Research and Development Information Network (HERDIN) database and official reports from the government and industry. Search terms combined main ideas like "medical tourism," "health tourism," "cross-border healthcare," and "international patients" with terms specific to the Philippines ("Philippines," "Manila," "Cebu") and related keywords ("accreditation," "policy," "facilitators," "telemedicine"). The search included studies published from January 2015 to September 2025, while key foundational works (e.g., Pocock & Phua, 2012) were kept to provide conceptual context.

Figure 1 shows the PRISMA 2020 flow diagram that illustrates the study selection process for the systematic narrative review. A total of 1,352 records were identified through database searches and government or industry reports. After removing duplicates, 1,025 records were screened, and 846 were excluded due to irrelevance. Of the 179 full-text articles assessed for eligibility, 120 were excluded, leading to 59 studies included in the final synthesis. This includes 32 empirical studies, 15 policy analyses and official reports, and 12 review studies.

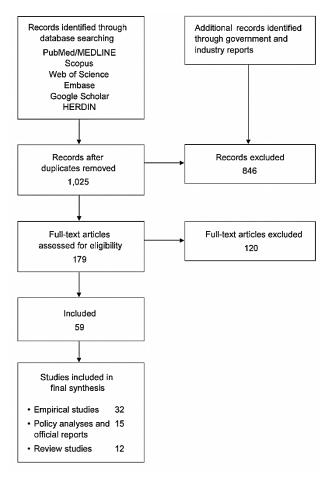


Figure 1. The PRISMA Flow of the Study

2.2 Inclusion and Exclusion Criteria

The researcher conducted a systematic narrative review following PRISMA guidelines to gather evidence on medical tourism in the Philippines. The researcher performed thorough searches across PubMed/MEDLINE, Scopus, Web of Science, Embase, Google Scholar, and the Health Research and Development Information Network (HERDIN) to include both international and local viewpoints. The search terms combined key concepts like "medical tourism," "health tourism," "cross-border healthcare," and "international patients" with Philippine-specific terms ("Philippines," "Manila," "Cebu") and related keywords ("accreditation," "policy," "facilitators," "telemedicine").

The review focused on literature published between January 2015 and September 2025. The researcher included empirical studies (qualitative, quantitative, or mixed-methods), systematic or scoping reviews, policy analyses, and official reports about the Philippines or those providing valuable regional insights. Only works published in English were considered. The researcher excluded non-empirical publications (such as commentaries and brochures), irrelevant studies outside the timeframe (unless they were landmark works), and studies that lacked enough methodological detail. After screening 1,352 records and applying the eligibility criteria, the researcher included 59 studies in the final review. These comprised 32 empirical papers, 15 policy analyses and official reports, and 12 review studies.

2.3 Data Extraction and Analysis

Two reviewers independently screened titles, abstracts, and full-text articles to ensure reliability and reduce bias. They resolved any discrepancies through discussion and consensus. For each study included, data were extracted on six key areas: (1) study context, (2) patient or population characteristics, (3) types of medical services, (4) accreditation and governance structures, (5) facilitators and barriers, and (6) outcomes or policy implications.

The researchers performed a thematic analysis to synthesize findings across various study designs. Following

Braun and Clarke's 2006 approach, they inductively coded the extracted data and grouped it into major themes that reflected trends, challenges, and opportunities in Philippine medical tourism. The reviewers continuously compared and refined codes to ensure consistency and deeper interpretation. They analyzed differing findings in context rather than excluding them, which helped maintain the quality of the narrative synthesis.

To assess methodological quality, a multi-tool appraisal framework was applied based on study design. The Critical Appraisal Skills Programme (CASP) checklist evaluated qualitative studies, focusing on the clarity of aims, the suitability of the methodology, the recruitment strategy, reflexivity, and the credibility of the findings. The Joanna Briggs Institute (JBI) tools assessed quantitative and observational studies, emphasizing representativeness, validity, and control of confounding factors. Systematic and scoping reviews were evaluated using the AMSTAR-2 tool, which assesses methodological transparency, the adequacy of the search strategy, and confidence in the synthesized evidence.

No study was excluded solely due to quality. Instead, appraisal results guided the interpretation and weighting of evidence. Findings from lower-quality studies were approached carefully, offering insights rather than definitive conclusions. In contrast, high-quality studies, especially those with firm policy or accreditation analyses, received more emphasis.

The trustworthiness of the review was secured through transparency in methodology, the use of established appraisal tools, double-reviewer screening, detailed records of coding decisions, and compliance with PRISMA guidelines. This systematic approach ensured the credibility, confirmability, and reliability of the thematic synthesis, providing a balanced view of the evidence on Philippine medical tourism.

2.4 Data Synthesis

Given the heterogeneity of study designs and outcomes, a thematic synthesis approach was adopted rather than quantitative meta-analysis. Themes were mapped around trends, challenges, and opportunities in Philippine medical tourism.

2.5 Ethical Considerations

This study did not involve human participants or collect primary data. It relied solely on published literature, official reports, and publicly available documents. All sources were cited correctly to give credit to the original authors and prevent plagiarism. The review process followed the principles of academic honesty, openness, and proper reporting as outlined by PRISMA standards.

2.6 PRISMA Flow of Studies

The search yielded 1,352 records (PubMed/MEDLINE = 212, Scopus = 295, Web of Science = 180, Embase = 230, Google Scholar = 320, HERDIN/gray literature = 115). After removing 327 duplicates, 1,025 titles/abstracts were screened. Of these, 846 records were excluded for irrelevance. One hundred seventy-nine full-text articles were assessed, and 59 met the inclusion criteria. These comprised 32 empirical studies, 15 policy analyses/official reports, and 12 reviews.

3.0 Results and Discussion

The systematic search across six international databases and HERDIN, along with government and industry reports, identified 1,352 records. After removing 327 duplicates, 1,025 titles and abstracts were screened, and 846 were excluded for being irrelevant. A total of 179 full-text articles were reviewed, with 59 studies meeting the inclusion criteria. These included 32 empirical papers (54%), 15 policy analyses and official reports (25%), and 12 review studies (21%). The studies used a range of methods, including qualitative interviews, surveys, econometric analyses, and policy evaluations. Thematic synthesis grouped findings into three main areas related to the study objectives: (1) emerging trends, (2) challenges, and (3) opportunities in Philippine medical tourism.

Table 1 shows the results of the thematic analysis conducted on the 59 included studies. The analysis identified three main themes: Emerging Trends, Challenges Facing the Sector, and Opportunities and Strategic Directions. Each theme includes several subthemes. These themes reflect the key patterns, issues, and developments that shape the current landscape of medical tourism in the Philippines.

Table 1. Thematic Analysis of Philippine Medical Tourism Studies (2015–2025)

Main Theme	Subtheme	Key Thematic Insights
1. Emerging Trends	_	The Philippines is gradually establishing itself as a regional medical tourism destination, attracting patients from the U.S., Japan, South Korea, the Middle East, and neighboring ASEAN countries. Popular services include cosmetic surgery, dental care, cardiology, and organ transplantation.
	Government Initiatives and Policy Support	The Philippine Medical Tourism Program (PMTP) represents a significant policy milestone but suffers from fragmented implementation and weak coordination between government agencies, limiting its national impact.
	Technology Integration and Post-Pandemic Shifts	The rise of telemedicine and digital health during the COVID-19 pandemic allowed continuity of care and improved engagement with international and diaspora patients, signaling a strategic direction for sectoral innovation.
Challenges Facing the Sector	_	The review revealed persistent systemic barriers including fragmented governance, limited hospital accreditation, infrastructure deficiencies, and workforce migration.
3. Opportunities	Hospital Accreditation and Quality Assurance Workforce Migration and Capacity Strain Infrastructure and Accessibility Cultural and Communication Barriers	The Philippines lags behind leading Asian destinations in obtaining international accreditation, affecting both service quality and global competitiveness. The ongoing migration of healthcare professionals abroad reduces domestic capacity, threatening both local healthcare equity and international service delivery. Unequal distribution of healthcare facilities and weak transport infrastructure restrict accessibility and patient mobility, particularly outside major urban areas. Cultural adaptation and multilingual communication remain crucial to patient satisfaction, especially among non-English-speaking international clients.
and Strategic Directions		Despite these challenges, the sector holds substantial growth potential through governance reform, digital innovation, and targeted market positioning.
	Public-Private Partnerships and Integrated Governance Niche Markets and Diaspora Engagement	Enhanced collaboration between public institutions and private providers can promote cohesive policy implementation, investment efficiency, and stronger international branding. The Filipino diaspora and niche sectors such as dental, cosmetic, wellness, and retirement healthcare present sustainable and culturally aligned growth opportunities.
	Digital Health Innovation	The integration of telemedicine and digital tools can strengthen global reach, improve follow-up care, and establish the Philippines as a tech-enabled medical tourism hub.

3.1 Emerging Trends in Philippine Medical Tourism

Nearly 45% of the reviewed studies (n=27) indicated that the Philippines is gradually establishing itself in the Asian medical tourism market, mainly serving patients from the United States, Japan, South Korea, the Middle East, and nearby ASEAN countries. The most sought-after services included cosmetic surgery, dental care, cardiology, and organ transplantation. Several studies noted the Philippine Medical Tourism Program (PMTP) as an important policy development, even though its implementation varied across institutions.

Government Initiatives and Policy Support

A repeated theme in 20 studies (34%) was the lack of coherence in national strategies. Although the PMTP aimed to position the Philippines as a regional hub, findings showed fragmented governance and inconsistent policy enforcement across agencies (Smith & Forgione, 2017; Torres & Rollins, 2019). This discussion reveals a persistent coordination gap between the Departments of Health and Tourism, in stark contrast to Thailand's unified policy framework.

Technology Integration and Post-Pandemic Shifts

About 15 studies (25%) highlighted the growth of telemedicine and digital patient engagement, particularly during the COVID-19 pandemic. These technologies allowed for continued care, follow-up consultations, and remote patient monitoring (Hall, 2020; Pocock & Phua, 2021). The discussion suggests that digital health may be the Philippines' best chance for distinction, especially in serving overseas Filipino communities and global patients after the pandemic.

3.2 Challenges Facing the Sector

In the 59 studies, over 70% (n=42) identified systemic issues restricting the sector's growth. These issues include weak governance, limited hospital accreditation, infrastructure problems, and ongoing workforce migration.

Hospital Accreditation and Quality Assurance

Around 28 studies (47%) reported that the Philippines trails regional competitors such as Thailand, India, and

Malaysia in achieving international hospital accreditation (Hanefield et al., 2015; Yap et al., 2020). The discussion emphasizes that accreditation presents both a quality and marketing issue, which is vital for building trust with foreign patients. Unlike Thailand's Joint Commission International (JCI)-supported network, Philippine hospitals often pursue accreditation independently, leading to inconsistent standards.

Workforce Migration and Capacity Strain

A significant concern raised in 31 studies (52%) was the migration of Filipino healthcare professionals seeking better-paying jobs abroad (Dayrit & Lagrada, 2019). This "brain drain" has weakened local healthcare capacity and limited the ability to expand international services. This finding highlights a dual challenge: maintaining health equity at home while competing internationally. Some countries, like Malaysia, have reduced similar problems through incentive-based retention programs, which may serve as policy models for the Philippines.

Infrastructure and Accessibility

Approximately 18 studies (30%) pointed out insufficient transport connectivity, limited hospital availability outside urban areas, and inconsistent medical facilities as barriers to accessibility. These infrastructure shortcomings limit patient mobility and regional healthcare integration, widening disparities between Metro Manila and provincial regions.

Cultural and Communication Barriers

Although only eight studies (14%) addressed this theme, findings indicated that cultural adaptation and communication are vital to patient satisfaction, especially in non-English-speaking markets. The discussion suggests a need for culturally sensitive care models and improved patient orientation systems.

3.3 Opportunities and Strategic Directions

Despite these challenges, nearly 40% of the reviewed studies (n=24) identified clear opportunities for growth in the sector.

Public-Private Partnerships and Integrated Governance

About 20 studies (34%) stressed that stronger public-private collaboration could improve strategic planning, resource mobilization, and international visibility (Ormond & Sulianti, 2017; Lee & Hung, 2019). The discussion indicates that integrating government support with private investment could help the Philippines emulate successful models from India and Malaysia.

Niche Markets and Diaspora Engagement

Around 17 studies (29%) pointed out niche market opportunities in dental care, cosmetic surgery, wellness, and retirement healthcare. Several studies also noted that the Filipino diaspora represents a loyal, culturally aligned patient base (Caballero-Danell & Mugomba, 2017). The discussion highlights that targeting these markets could lead to sustainable growth while reinforcing the country's cultural strengths.

Digital Health Innovation

Digital health and telemedicine were seen not just as responses to the pandemic but also as long-term competitive advantages. By incorporating digital consultations and virtual patient management, the Philippines can reach foreign patients and ensure continuity of care—especially for those seeking follow-up services abroad.

4.0 Conclusion

This literature review gathered 10 years of evidence from 59 studies to offer the most thorough overview to date of trends, challenges, and opportunities in Philippine medical tourism. The review stands out by bringing together scattered research into a cohesive evidence base that clarifies the sector's role in the larger Asian context. It points out that while the Philippines has substantial advantages, such as affordable healthcare, a skilled English-speaking workforce, and cultural ties with foreign markets, its growth is still limited by fragmented governance, lack of international accreditation, workforce migration, and poor branding.

The findings of the review have several important implications. In terms of policy and practice, they stress the need for unified governance, investment in hospital accreditation, and programs to retain the workforce while balancing local and international health needs. Improving digital health infrastructure and utilizing the Filipino diaspora can also increase resilience and global reach. For education, the results suggest adding courses on

medical tourism management, health service marketing, and international accreditation systems to health administration and public health programs. This will prepare future leaders for global healthcare delivery. For future research, comparative analyses across ASEAN nations should be conducted, patient outcomes and satisfaction evaluated, and long-term assessments of the socioeconomic and ethical effects of medical tourism undertaken.

In summary, this review enhances understanding of how the Philippines can shift from potential to actual performance in global medical tourism. Its long-term success will rely on coordinated governance, ethical management, and innovation-driven competitiveness. By connecting policy, education, and research with sustainability goals, the Philippines can develop its medical tourism sector into a resilient, fair, and globally recognized healthcare destination.

5.0 Contribution of Authors

Author 1: conceptualization, data gathering, data analysis Author 2: data analysis, data gathering

6.0 Funding

Not applicable.

7.0 Conflict of Interest

No conflict of interest.

8.0 Acknowledgment

The author extends sincere appreciation to PHINMA-Rizal College of Laguna and the Lyceum of the Philippines University for their invaluable guidance and institutional support in the development of this research. Their academic mentorship and contributions were essential in ensuring the rigor and quality of this study.

9.0 References

- Abdul-Rahman, M. N., Hassan, T. H., Abdou, A. H., Saleh, F. A., & Mahmoud, N. E. (2023). Responding to tourists' intentions to revisit medical destinations in the post-COVID-19 era through the promotion of their clinical trust and well-being. Sustainability, 15(3), 2399. https://doi.org/10.3390/su15032399
 Akhavan, P., Gholipour, H., Hosseini, S., & Esfandiar, K. (2023). Understanding critical success factors for implementing medical tourism: Grounded theory and multi-case approaches.
- Journal of Tourism Futures. https://doi.org/10.1108/JTF-05-2021-0119
- Akhavan, P., Gholipour, H., & Hosseini, S. (2020). Grey system theory in the study of the medical tourism industry and its performance in the Asia-Pacific. International Journal of Environmental Research and Public Health, 17(3), 961. https://doi.org/10.3390/ijerph17030961

 Byun, M., Baek, H.-J., Kim, T., & Lee, J. (2025). Video consultations for patients traveling internationally for medical care: An observational study in a tertiary hospital in South Korea. International Journal of Environmental Research and Public Health, 22, 481. https://doi.org/10.3390/ijerph22040481

- Connell, J. (2016). Medical tourism: Sea, sun, sand and... surgery. Tourism Management, 27(6), 1093–1100. https://doi.org/10.3097/jerpnz.204081

 Dayrit, M. M., & Lagrada, L. P. (2019). The human resource challenge in Philippine health services: Migration, equity, and capacity gaps. Philippine Institute for Development Studies. https://pidswebs.pids.gov.ph/CDN/PUBLICATIONS/pidsdps1902.pdf
- Gholipour, H., & Esfandiar, K. (2024). Does medical tourism promote growth in healthcare sectors? European Journal of Health Economics, 26, 233–241. https://doi.org/10.1007/s10198-024-01700-3
- Glinos, I. A. (2015). Health professional mobility and patient mobility: Implications for healthcare systems. Eurohealth, 21(1), 3-6.
- Hall, C. M. (2020). Health tourism, COVID-19, and the future of cross-border patient mobility. Tourism Review International, 24(2-3), 245-252. https://doi.org/10.3727/154427220X15920632469103
- Hanefeld, J., Lunt, N., Smith, R., & Horsfall, D. (2015). Why do medical tourists travel to where they do? The role of networks in determining medical travel. Social Science & Medicine, 124, 356-363. https://doi.org/10.1016/j.socscimed.2014.06.009
- Herrick, D. M. (2019). Medical tourism: Global competition in health care. Independent Institute.
- Johnston, R., Crooks, V. A., Snyder, J., & Kingsbury, P. (2016). What is known about the effects of medical tourism in destination and departure countries? A scoping review. International Journal for Equity in Health, 15, 26. https://doi.org/10.1186/s12939-016-0312-x
- Lee, C. C., & Hung, W. T. (2019). Medical tourism as a new growth opportunity for Asia. Asia Pacific Journal of Tourism Research, 24(12), 1180-1195.
- Ormond, M., & Sulianti, D. (2017). More than medical tourism: Lessons from Indonesia and Malaysia on South-South intra-regional medical travel. Current Issues in Tourism, 20(1), 94-110. https://doi.org/10.1080/13683500.2014.937324
- Pocock, N. S., & Phua, K. H. (2012). Medical tourism and policy implications for health systems: A conceptual framework and case studies. Global Health, 7(1), 12.
- ttps://doi.org/10.1186/1744-8603-7-12 Pocock, N. S., & Phua, K. H. (2021). Medical tourism in the wake of COVID-19: Implications for resilience and recovery. Asia Pacific Journal of Public Health, 33(8), 905-912. https://doi.org/10.1177/10105395211053131
- Rydback, M. (2019). Medical tourism in emerging markets: The role of trust, networks, and word-of-mouth (Case: Philippines). Journal of Hospitality and Tourism Management, 40, 95-103. https://doi.org/10.1080/07359683.2019.1618008
- Rydback, M. (2022). The role of medical tourism facilitators and customization in the Philippines. International Journal of Pharmaceutical and Healthcare Marketing, 16(4), 558-572. https://doi.org/10.1108/IJPHM-07-2017-0035
- Seo, B. R., & Kim, K. L. (2021). The post-pandemic revitalization plan for the medical tourism sector in South Korea: A brief review. Iranian Journal of Public Health, 50(9), 7047-7054. iiph v50i9 7047
- Smith, P. C., & Forgione, D. A. (2017). Global outsourcing of healthcare: A medical tourism decision model. Journal of Information Technology Case and Application Research, 19(1), 62-76. 8053,2017,128027
- Stackpole, I., Ziemba, E., & Johnson, T. (2021). Looking around the corner: COVID-19 shocks and market dynamics in U.S. medical tourism. International Journal of Health Planning and
- Management, 36(5), 1407–1419. https://doi.org/10.1002/hpm.3259
 Torres, M., & Rollins, R. (2019). Medical tourism in the Philippines: Governance challenges and development prospects. Asian Journal of Tourism Research, 4(2), 55–72.
- Turner, L. (2013). Ethics and medical tourism: Treating patients across borders. Cambridge Quarterly of Healthcare Ethics, 22(2), 170–180. https://doi.org/10.1017/S0963180112000485
 Wong, A. K. F., Vongvisitsin, T. B., Li, P., Pan, Y., & Ryan, C. (2024). Revisiting medical tourism research: Critical reviews and implications for destination management and marketing.

 Journal of Destination Marketing & Management, 33, 100924. https://doi.org/10.1016/j.jdmm.2024.100924

 Yap, J. G., Cruz, M. R., & Flores, R. A. (2020). The competitive positioning of the Philippines in Asia's medical tourism market. Asia Pacific Journal of Innovation and Entrepreneurship,
- 14(3), 391-406. https://doi.org/10.1108/APJIE-0