Letter to the editor

Surgical care of international patients with congenital heart disease in India

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It was a pleasure to read an original article on the major characteristics of international patients with congenital heart diseases (CHD) who visit India for treatment.¹ Authors have beautifully highlighted the high medical costs of medical tourism along with the need of development of local facilities for babies requiring emergency management soon after birth and patients who may be too ill to be accepted by regular airlines. Patients require high-quality healthcare facilities, economical and easy travel to medical tourism destinations especially CHD patients.²

The history of evolution of paediatric cardiac care in India is recent. Tremendous technological and manpower development has occurred in the surgical care of children with CHD globally. Significant progress in paediatric cardiac surgery and care has been developed in different tertiary care hospitals in India.³ There is a severe limitation in the surgical care of paediatric heart patients in Nepal although recently open heart surgery has started in Nepal.⁴ Bhutan and Nepal being the closest and longest border-sharing neighbours of India the cardiac patients from these countries can benefit from the paediatric cardiac surgical facilities it has developed. There is a need of certified international accreditation cardiac centres in various parts of India where practicing Indian as well as international physicians will be able to transfer/refer their

patients. Adequate attention and facility should be provided by international airlines to such patients. Also, wherever and whenever possible, transportation of paediatric cardiac patients in monitored ambulances by land is practical and cost-effective. Such arrangements in both inter and intra nation level can materialise for both pre- and postoperative stages.

The specification of certified paediatric cardiac centres and hospitals, safe land and air transportation in India may be of great use to international patients, specially, from its neighbouring countries. Physical proximity may open limitless opportunities in the surgical management of very costly operations required/indicated in patients with CHD.

References

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