

Patients who travel abroad for plastic surgery can bring home serious complications

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With the promise of inexpensive procedures luring patients to travel abroad for plastic surgery, medical tourism has become an expanding, multi-billion-dollar industry. But while the initial procedure may be cheap, it can place a significant burden on U.S. public health systems when patients return from abroad with complications. A new study by investigators at Brigham and Women's Hospital describes the magnitude of medical complications that can result from plastic surgery abroad. Their study is published in *Plastic and Reconstructive Surgery*.

"Many think of medical tourism as wealthy patients traveling to receive care at high quality medical institutions abroad, but what we're reporting on here are repercussions that can result when patients return to their home countries to undergo elective [plastic surgery procedures](#) at a lower price," said senior author Dennis Orgill, MD, PhD, medical director of Brigham and Women's Hospital's Wound Care Center. "Patients need to be very cautious when they go outside of the U.S. for elective plastic [surgery](#). The safety and regulatory systems that protect patients in the U.S. are often not in place in a patient's home country."

In a retrospective analysis, Kimberly Ross, MPH, Orgill and colleagues evaluated patients who had been treated at BWH over the last seven years for complications or complaints associated with [plastic surgery](#) performed in a developing country. Of the 78 patients evaluated, the most common complications were seen following abdominoplasty (35

patients) or breast augmentation (25 patients). The most common destination country for these surgeries was the Dominican Republic—75 percent of the patients in the study traveled there for elective procedures.

Complications included infections, pain and wound-healing issues. Fourteen patients presented with infections at their surgical sites, including infection from multi-drug resistant bacteria. Eight patients required the removal of damaged tissue or foreign objects from the wound site over a series of office visits.

The team also found that most patients relied on their medical insurance to cover the cost of follow-up care when they returned to the U.S. About 60 percent of the patients studied were on Massachusetts Medicaid. Four [patients](#) in the study admitted to returning to their original surgeon—despite complications—for a second surgical procedure abroad.

"We hope that this study will bring attention to this emerging issue and encourage others to report any results related to [medical tourism](#) treatment and patterns," the authors wrote.

More information: Ross, K et al. "Plastic Surgery Complications from Medical Tourism Treated in a U.S. Academic Medical Center" *Plastic & Reconstructive Surgery* [DOI: 10.1097/PRS.00000000000004214](https://doi.org/10.1097/PRS.00000000000004214)

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