

Annexure - 1 : Code of Ethics Formulated by the Association of Private Hospitals of Malaysia

PREAMBLE

Private hospitals form a part of the service industry of the country and address in particular, the medical needs of the country.

They form a fraternity dedicated to the Science of Human Health. Each individual private hospital is expected to subordinate its own interests to the welfare of its patients and together with other hospitals to raise the standard of health in the country.

The Association of Private Hospitals of Malaysia, as such a fraternity, has enunciated a code of ethics to guide its members on these and other related issues.

This code of ethics has thus been adopted by the Association of Private Hospitals to serve as guidelines for its members in addressing the increasingly complex business and clinical issues facing hospitals. Member hospitals of the Association are expected to adhere to and be guided by the principles contained in this code of ethics as long as they remain members of the Association of Private Hospitals of Malaysia.

Objectives of the Hospital

- ❖ To provide the best possible care, including accident and emergency care at affordable cost for the sick and injured at all times irrespective of race and religion.

Healthcare Tourism: Opportunities for India

- ❖ In doing so the welfare of patients should be of prime importance and all sensitivities of patients including that of religion and customs should be respected.
- ❖ To constantly upgrade and improve methods for the care, cure, amelioration and prevention of diseases.
- ❖ To further the practice of medicine by physicians consistent with the acceptable quality of patient care.
- ❖ To encourage research and teaching and assist in the advancement of scientific knowledge.
- ❖ To foster relationship between hospitals and other health related organisations.
- ❖ While it is accepted that profits is amongst the objectives of private hospitals, they should not be the only consideration.

Hospitals Inter-relations

Private

- ❖ Healthy and harmonious competition among hospitals is to be encouraged.
- ❖ Freedom of choice of hospitals and doctors by patients is to be recognised and accepted.
- ❖ Cordial relationship and co-operation between hospitals is to be observed.
- ❖ There shall be no “pinching” of staff between member hospitals.
- ❖ Information between hospitals shall only be obtained through authorised and proper manner.
- ❖ There shall be no touting for patients.
- ❖ Discrediting and passing negative information/remarks between member hospitals is not acceptable.

Government

- ❖ Cordial working relationship should be maintained with Government hospitals/clinics especially those located in the same area.
- ❖ Sharing of facilities in certain areas is to be encouraged and worked out thus complementing the efforts of public sector medical care.

Responsibilities of Individual Hospital

- ❖ Each individual hospital is expected to provide the best possible standard of care to its patients.
- ❖ Hospitals should look after the welfare of their staff both medical and paramedical.
- ❖ To maintain a high standard of hygiene and cleanliness.
- ❖ To provide adequate emergency and resuscitative services.
- ❖ Not to allow the usage of its premises for purposes not related directly or indirectly to medical care.
- ❖ To ensure that in house pharmacies should at all times provide approved quality medication at competitive prices.
- ❖ To ensure that doctors practising in the hospitals abide by the law of the country and adhere to medical ethics.
- ❖ At all times to work within the frame work of the law of the country.

Confidentiality

- ❖ Patient records should be properly kept and safeguarded, and handled only by authorised personnel.
- ❖ Admission registers should be properly maintained.
- ❖ No information regarding patients' illnesses or treatment should be divulged without the consent of the patient, except when required by law.
- ❖ Confidential matters of any hospital should be obtained through proper channels.

Public Notices of Private Hospitals and Advertisements

- ❖ It is recognized that each hospital need from time to time to issue relevant information to the public regarding the services or new equipment made available.
- ❖ For general information each hospital is to observe and follow the rules and guidelines stipulated under 'Pindaan Akta Ubat (Iklan and Penjualan) 1956, Pindaan 1990' or any other regulations and rules made from time to time by the Government.

Ethical Committee

This code of ethics is exclusively the code of the Association of Private Hospitals of Malaysia and has no Governmental nor official

Healthcare Tourism: Opportunities for India

statutory effect. Members agree to adhere to and be guided by this code of ethics on a voluntary basis in order to maintain active membership in the Association of Private Hospitals of Malaysia

This code of ethics will be administered by the Ethics Committee of the Association. Questions concerning any hospital's adherence to this code of ethics may be brought to the Ethics Committee by any member of the Association, any other hospitals, the public (or any consumer groups) or any interested party via written communications to the Board. The Ethics Committee will respond to questions raised regarding the code of ethics in any manner they feel appropriate depending on the question raised. In all instances, the committee will notify the member hospital in question and give that member an opportunity to present responses to any questions raised. The Ethics Committee will be empowered to write advisory letters to member hospitals during the investigations and inform them the results of their deliberations. However, any other actions they recommend be taken based on their investigations must be submitted to the full Board for the Board's approval prior to any action being taken.

Annexure - 2

JOINT COMMISSION INTERNATIONAL (JCI) ACCREDITED ORGANISATIONS

(As of December 31, 2007)

AUSTRIA

1. *Institut für medizinische und chemische Labordiagnostik*
LKH Villach
Villach, Austria
Accredited: 16 November 2005
2. *Landeskrankenhaus Villach*
Villach, Austria
Accredited: 13 December 2003
3. *Neurologisches Therapiezentrum Kapfenberg GmbH*
Kapfenberg, Austria
Accredited by the JCI Hospital Accreditation program: 11 April 2002
Accredited by the JCI Care Continuum Accreditation program: 19 May 2005
4. *Sonderkrankenanstalt für Rehabilitation, Thermenhof Warmbad GmbH*
Warmbad-Villach, Austria
Accredited: 19 November 2005

BARBADOS

5. *Barbados Fertility Centre*
Christ Church, Barbados
Accredited: 27 September 2007

BERMUDA

6. *King Edward VII Memorial Hospital Department of Pathology*
Paget, Bermuda
Accredited: 14 January 2006

BRAZIL

7. *AMIL Total Care - Barra da Tijuca*
Rio de Janeiro, Brazil
Accredited: 1 October 2005
8. *AMIL Total Care - Berrini*
São Paulo, Brazil
Accredited: 24 September 2005
9. *AMIL Total Care - Botafogo*
Rio de Janeiro, Brazil
Accredited: 10 March 2006
10. *Hospital de Traumatologia-Ortopedia*
Rio de Janeiro, Brazil
Accredited: 10 March 2006
11. *Hospital do Coração*
São Paulo, Brazil
Accredited: 10 November 2006
12. *Hospital Israelita Albert Einstein*
São Paulo, Brazil
First Accredited: 17 December 1999
Re-accredited: 13 December 2002
Re-accredited: 18 February 2006

13. *Hospital Moinhos de Vento*
Porto Alegre, Brazil
First Accredited: 13 December 2002
Re-accredited: 1 October 2005
14. *Hospital Samaritano*
São Paulo, Brazil
Accredited: 16 December 2004
15. *Instituto Estadual de Hematologia - Hemorio*
Rio de Janeiro, Brazil
First Accredited: 1 December 2001
Re-accredited: 17 November 2003
Re-accredited: 30 March 2007
16. PRONEP – Rio de Janeiro
Rio de Janeiro, Brazil
Accredited: 4 March 2007
17. PRONEP – Sao Paulo
Sao Paulo, Brazil
Accredited: 1 March 2007

CHINA

18. *Beijing United Family Hospital and Clinics*
Beijing, PR China
Accredited: 1 September 2005
19. *Clifford Hospital*
Guangzhou, Guangdong Province, PR China
Accredited: 20 December 2003
Re-Accredited: 16 December 2006
20. *Sir Run Shaw Hospital*
Zhejiang, China P.R.
Accredited: 23 December 2006

HONG KONG

21. *Hong Kong Adventist Hospital*
Hong Kong, SAR, China
Accredited: 25 February 2006

22. *Tsuen Wan Adventist Hospital*
Hong Kong, SAR, China
Accredited: 3 March 2006

CZECH REPUBLIC

23. *Central Military Hospital*
Prague, Czech Republic
Accredited: 4 December 2004
24. *Na Homolce Hospital*
Prague, Czech Republic
Accredited: 25 June 2005
25. *Institute of Haematology and Blood Transfusion*
Prague, Czech Republic
Accredited: 23 June 2007

DENMARK

26. *Amager Hospital*
Copenhagen, Denmark
First Accredited: 28 February 2002
Re-accredited: 17 March 2005
27. *Bispebjerg Hospital*
Copenhagen, Denmark
First Accredited: 22 February 2002
Re-accredited: 11 March 2005
28. *Frederiksberg Hospital*
Copenhagen, Denmark
First Accredited: 1 February 2002
Re-accredited: 5 February 2005
29. *Hvidovre Hospital*
Copenhagen, Denmark
First Accredited: 8 February 2002
Re-accredited: 4 March 2005

-
30. *Copenhagen Fire Brigade*
Copenhagen, Denmark
First Accredited: 14 February 2003
Re-accredited: 1 July 2006
31. *Rigshospitalet*
Copenhagen, Denmark
First Accredited: 8 March 2002
Re-accredited: 1 February 2005
32. *Sct. Hans Hospital*
Copenhagen, Denmark
First Accredited: 14 February 2002
Re-accredited: 11 February 2005

EGYPT

33. *Dar Al Fouad Hospital*
Giza, Egypt
Accredited: 7 July 2005

ETHIOPIA

34. *International Clinical Laboratories*
Addis Ababa, Ethiopia
Accredited: 1 September 2004

GERMANY

35. *DRK Kliniken Berlin*
Berlin, Germany
First Accredited: 13 April 2002
Re-accredited: 23 April 2005
36. *Hochtaunus-Kliniken gGmbH*
Bad Homburg, Germany
Accredited: 14 May 2005
37. *HUMAINE Vogtland-Klinikum Plauen*
Plauen, Germany
First Accredited: 23 May 2001
Re-accredited: 2004

Healthcare Tourism: Opportunities for India

38. *Klinikum Chemnitz gGmbH*
Chemnitz, Germany
First Accredited: 8 July 2000
Re-accredited: 2004
39. *Kreis Krankenhaus Greiz GmbH*
Greiz, Germany
First Accredited: 14 December 2001
Re-accredited: 5 May 2005
40. *Städtisches Klinikum Görlitz gGmbH*
Görlitz, Germany
Accredited: 8 April 2006
41. *Waldkrankenhaus "Rudolf Elle" GmbH*
Eisenberg, Germany
Accredited: 10 December 2004

INDIA

42. *Apollo Hospital, Chennai*
Chennai, India
Accredited: 29 January 2006
43. *Apollo Hospital, Hyderabad*
Hyderabad, India
Accredited: 28 April 2006
Disease- or Condition-Specific Care (DCSC) Certification for
Acute Stroke: 29 April 2006
44. *Asian Heart Institute*
Mumbai, India
Accredited: 20 October 2006
45. *Indraprastha Apollo Hospital*
New Delhi, India
Accredited: 18 June 2005
46. *Shroff Eye Hospital*
Mumbai, India
Accredited: 18 February 2006

-
47. *Wockhardt Hospital, Mumbai*
Mumbai, India
Accredited: 26 August 2005
 48. Fortis Hospital
Mohali, India
Accredited: 15 June 2007
 49. Satguru Pratap Singh Apollo Hospital
Punjab, India
Accredited: 3 February 2007

INDONESIA

50. Siloam Hospital Lippo Karawaci
Lippo Karawasi, Indonesia
Accredited: 19 September 2007

IRELAND

51. *Blackrock Clinic*
Dublin, Ireland
First Accredited: 19 October 2002
Re-accredited: 13 October 2005
52. *Bon Secours Hospital, Cork*
Cork, Ireland
Accredited: 28 May 2005
53. *Bon Secours Hospital, Galway*
Galway, Ireland
Accredited: 1 June 2005
54. *Bon Secours Hospital Glasnevin*
Dublin, Ireland
First Accredited: 14 February 2002
Re-accredited: 4 March 2005
55. *Bon Secours Hospital, Tralee*
Tralee, Ireland
Accredited: 7 May 2005

Healthcare Tourism: Opportunities for India

56. *Mater Private Hospital*
Dublin, Ireland
First Accredited: 24 October 2002
Re-accredited: 1 October 2005
57. *Mount Carmel Hospital*
Dublin, Ireland
First Accredited: 22 November 2002
Re-accredited: 6 October 2005
58. *St. Patrick's Hospital*
Dublin, Ireland
Accredited: 19 Dec 2003

ITALY

59. *CDI Centro Diagnostico Italiano S.p.a.*
Milano, Italy
Accredited: 20 May 2006
60. *European Institute of Oncology - Istituto Europeo di Oncologia*
Milan, Italy
First Accredited: 20 December 2002
Re-accredited: 28 January 2006
61. *Humanitas Gavazzeni*
Bergamo, Italy
Accredited: 23 December 2006
62. *Humanitas Mirasole S.P.A.*
Milan, Italy
First Accredited: 14 December 2002
Re-accredited: 4 February 2006
63. *Presidio Ospedaliero Oglio-Po*
Vicomosciano, Italy
Accredited: 7 October 2006
64. *Santa Chiara Hospital*
Trento, Italy
Accredited: 25 June 2005

-
65. Istituto Clinico Mater Domini
Castellanza, Italy
Accredited: 25 May 2007
66. *Ospedale Pediatrico Bambino Gesù*
Roma, Italy
Accredited: 16 Dec 2006

JORDAN

67. *King Hussein Cancer Center*
Amman, Jordan
Accredited: 23 February 2006
68. *Jordan Hospital and Medical Centre*
Amman, Jordan
Accredited: 1 June 2007

SAUDI ARABIA

69. *Al Imam Abdulrahman Bin Faisal Hospital*
Dammam, Kingdom of Saudi Arabia
Accredited: 15 November 2006
70. *Dr. Soliman Fakeeh Hospital*
Jeddah, Kingdom of Saudi Arabia
Accredited: 27 July 2006
71. *King Faisal Specialist Hospital and Research Centre- Jeddah*
Jeddah, Kingdom of Saudi Arabia
Accredited: 30 May 2002
72. *King Faisal Specialist Hospital and Research Centre- Riyadh*
Riyadh, Kingdom of Saudi Arabia
First Accredited: 16 November 2000
Re-accredited: 31 March 2005
73. *King Khaled Eye Specialist Hospital*
Riyadh, Kingdom of Saudi Arabia
First Accredited: 10 May 2001
Re-accredited: 24 March 2005

Healthcare Tourism: Opportunities for India

74. *Mouwasat Hospital*
Dammam, Kingdom of Saudi Arabia
Accredited: 7 December 2006
75. *Saad Specialist Hospital*
Al-Khobar, Kingdom of Saudi Arabia
First Accredited: 24 July 2002
Re-accredited: 28 July 2005
76. Saudi Aramco Medical Services Organization
Dhahran, Kingdom of Saudi Arabia
First Accredited: 3 October 2002
Re-accredited: 8 September 2005
77. King Abdulaziz Medical City – Al Ahsa
Al Ahsa, Kingdom of Saudi Arabia
Accredited: 9 November 2006
78. *King Abdulaziz Medical City – Jeddah*
Jeddah, Kingdom of Saudi Arabia
Accredited: 23 November 2006
79. King Abdulaziz Medical City - Riyadh
Riyadh, Kingdom of Saudi Arabia
Accredited: 30 November 2006

KOREA

80. Severance Hospital, Yonsei University College of Medicine
Seoul, Korea
Accredited: 2 May 2007

MEXICO

81. Christus Muguerza Alta Especialidad
Monterrey, Mexico
Accredited : 22 July 2007

PAKISTAN

82. *Aga Khan University Hospital*
Karachi, Pakistan
Accredited: 8 July 2006

PHILIPPINES

83. *St. Luke's Medical Center*
Quezon City, Philippines
Accredited: 22 November 2003
Re-Accredited: 18 November 2006
84. *The Medical City*
Pasig City, Philippines
Accredited: 7 November 2006

QATAR

85. *Al-Amal Hospital*
Hamad Medical Corporation
Doha, Qatar
Accredited: 23 June 2006
86. *Al Khor Hospital*
Hamad Medical Corporation
Doha, Qatar
Accredited: 15 September 2006
87. *Hamad General Hospital*
Hamad Medical Corporation
Doha, Qatar
Accredited: 15 September 2006
88. *Rumailah Hospital*
Hamad Medical Corporation
Doha, Qatar
Accredited: 22 September 2006
89. *Women's Hospital*
Hamad Medical Corporation
Doha, Qatar
Accredited: 30 June 2006

SINGAPORE

90. *Alexandra Hospital*
Singapore
Accredited: 22 July 2005

Healthcare Tourism: Opportunities for India

91. *Changi General Hospital*
Singapore
Accredited: 11 June 2005
Accredited by the Disease or Condition-Specific Care (DCSC)
Certification Program: 25 January 2007
92. *Gleneagles Hospital*
Singapore
Accredited: 27 May 2006
93. *Institute of Mental Health/Woodbridge Hospital*
Singapore
Accredited: 29 July 2005
94. *Johns Hopkins Singapore International Medical Centre*
Singapore
Accredited: 4 August 2004
95. *KK Women's and Children's Hospital*
Singapore
Accredited: 9 December 2005
96. *Mount Elizabeth Hospital*
Singapore
Accredited: 3 June 2006
97. *National Heart Centre of Singapore*
Singapore
Accredited: 27 October 2005
98. *National University Hospital*
Singapore
Accredited: 1 August 2004
99. *Singapore General Hospital*
Singapore
Accredited: 16 July 2005
100. *Tan Tock Seng Hospital*
Singapore
Accredited: 6 August 2005

SPAIN

101. *CAP Hospitalet Vandellós*
Tarragona, Spain
First Accredited: 22 November 2001
Re-accredited: 18 December 2004
102. *Centre d'Atencio Primaria de Cambrils*
Tarragona, Spain
Accredited: 23 June 2004
103. *Centre d'Atencio Primaria Salou*
Tarragona, Spain
Accredited: 23 June 2004
104. *Centro Médico Teknon*
Barcelona, Spain
Accredited: 5 December 2002
105. *Clínica Universitaria de Navarra*
Navarra, Spain
Accredited: 29 May 2004
106. *Hospital Costa del Sol*
Marbella, Spain
First Accredited: 29 April 1999
Re-accredited: 2002
107. *Hospital General de Catalunya*
Barcelona, Spain
First Accredited: 4 July 1998
Re-accredited: 2002
108. *Institut Guttmann*
Barcelona, Spain
Accredited: 5 November 2005
109. *Instituto Balear de Oftalmologia*
Mallorca, Spain
Accredited: 10 June 2004

Healthcare Tourism: Opportunities for India

110. *Instituto Oftalmológico de Alicante*
Alicante, Spain
First Accredited: 11 December 1998
Re-accredited: 2002
111. *Residència d'Avis La Torrassa*
Barcelona, Spain
Accredited: 29 September 2005
112. *Residència Geriàtrica Montsacopa*
Girona, Spain
Accredited: 29 September 2005
113. *Residència Llar Caixa Terrassa*
Barcelona, Spain
Accredited: 29 September 2005

TAIWAN

114. *Min-Sheng General Hospital*
Tao-Yuan, Taiwan
Accredited: 15 July 2006
115. *Taipei Medical University-Wan Fang Medical Center*
Taipei, Taiwan
Accredited: 22 July 2006

THAILAND

116. *Bumrungrad International*
Bangkok, Thailand
First Accredited: 2 February 2002
Re-accredited: 8 April 2005
Accredited by the Disease or Condition-Specific Care (DCSC)
Certification Program: 28 October 2006
117. *Bangkok Hospital Medical Center*
Bangkok, Thailand
Accredited: 30 June 2007
118. *Samitivej Sukhumvit Hospital*
Bangkok, Thailand
Accredited: 27 January 2007

TURKEY

119. *Acibadem Healthcare Group*
Istanbul, Turkey
Accredited: 5 February 2005
120. *Alman Hastanesi/Deutsches Krankenhaus*
Istanbul, Turkey
Accredited: 3 June 2006
121. *Bayindir Hospital*
Ankara, Turkey
Accredited: 15 July 2006
122. *CardioCheck Görüntüleme Merkezi*
Ankara, Turkey
Accredited: 10 December 2005
123. *Dünya Eye Hospital*
Istanbul, Turkey
Accredited: 19 July 2006
124. *Istanbul Memorial Hospital*
Istanbul, Turkey
First Accredited: 29 March 2002
Re-accredited: 29 April 2005
125. *Kent Hastanesi*
Izmir, Turkey
Accredited: 10 June 2006
126. *Medline Alarm Sağlık Hizmetleri A.Ş.*
Istanbul, Turkey
Accredited: 28 April 2005
127. *Mesa Hastanesi*
Ankara, Turkey
Accredited: 1 July 2006
128. *Metropolitan Florence Nightingale Hospital*
Istanbul, Turkey
Accredited: 26 June 2003

Healthcare Tourism: Opportunities for India

129. *Vehbi Koc Foundation American Hospital*
Istanbul, Turkey
First Accredited: 15 December 2002
Re-accredited: 16 December 2005
130. *Anadolu Saglik Merkezi*
Kocaeli, Turkey
Accredited: 16 February 2007
131. *Caglayan Florence Nightingale Hospital*
Istanbul, Turkey
Accredited: 17 April 2004
132. *Cukurova University Medical Faculty Central Laboratory*
Adana, Turkey
Accredited: 20 October 2006
133. *Hacettepe University Adult Hospital*
Ankara, Turkey
Accredited: 14 September 2007
134. *Hisar Intercontinental Hospital*
Istanbul, Turkey
Accredited: 20 January 2007
135. *Turkish Red Crescent Society Middle Anatolia Regional Blood Center*
Ankara, Turkey
Accredited: 29 June 2007

UNITED ARAB EMIRATES

136. *Al Rahba Hospital*
Abu Dhabi, United Arab Emirates
Accredited: 4 May 2006
137. *American Hospital Dubai*
Dubai, United Arab Emirates
First Accredited: 25 May 2000
Re-accredited: 28 May 2003
Re-accredited: 27 April 2006

138. *Tawam Hospital*
Al Ain, United Arab Emirates
Accredited: 11 May 2006
139. Al Wasl Maternity & Paediatric Hospital – DOHMS
Dubai, United Arab Emirates
Accredited: 8 September 2007
140. *Oasis Hospital*
Al Ain, United Arab Emirates
Accredited: 8 June 2007

Annexure - 3

Bringing Quality, Accessible and Affordable Healthcare in India
A Ten Point Agenda by Indian Healthcare Federation

1. *Increasing Government spending on healthcare:* Government spending on Healthcare in India is low, compared to countries like China, Thailand, Korea and Brazil. Currently it stands at 0.52% of the GDP and it should be increased to at least 6%.
2. Government should give more focus on Public Health especially rural primary care, with greater de-centralisation to increase effectiveness:
 - Reinvest heavily in public health systems-public health institutions, Management Information Systems, surveillance. Fund allocation should vary by state depending on needs and level of performance.
 - Concentrate efforts and introduce programmes to prevent cardiovascular diseases, mental health, injuries and more importantly HIV & AIDS.
 - Reduce centrally sponsored schemes and transfer resources to States.
3. *Spur private investments in under-served areas:* Central & State Governments should identify areas that need additional Healthcare Delivery capacity based on assessment of –number of beds per '000, quality of existing beds, affordability levels of residents. Then incentivise the Industry:
 - Accord “Infrastructure Status” to Healthcare Industry with ten year tax holidays and carry forward of losses.

- Provide land at subsidised rate.
 - Remove Customs duty on imported Medical Equipment, Consumables and disposables. This will make high –quality healthcare affordable.
4. *Create public-private partnerships* : in terms of contract of services, private management of public facilities, compliment PHCs in delivery of care through organising regular camps by private organisations.
 5. *Increase availability of qualified practitioners in rural areas including nurses and paramedics.* Create incentives in terms of :
 - Monetary incentives :-
 - o Monthly incentive allowance
 - o Tax deduction of 40% on incomes of doctors practicing in rural areas.
 - Non-Monetary incentives:-
 - o Mandatory rural service for doctors who qualify for PG Courses
 - o Reservations of select PG seats for in-service rural doctors.
 6. *Central & State Governments to create incentives* : to attract investments in medical colleges and nursing schools in under-served areas to check the imbalance in capacity of medical education.
 7. *Government should stimulate the growth of private, social and community health insurance* : to improve affordability.
 8. Give greater autonomy to hospitals.
 9. *Set up of more hospitals* : on the lines of All India Institute of Medical Sciences (AIIMS) and upgrade existing Medical Colleges to the level of AIIMS to have an evenly spread Healthcare system across India.
 10. *Affordable Medicines* : Government should provide cheaper and quality medicines to the needy by enlarging the scope of many schemes aimed at providing relief to lower economic groups. Essential Drugs for “below the poverty line” population should be dispensed at subsidised rates through the local Primary Healthcare Centre.

Annexure - 4

INCREASING SHARE OF AGEING POPULATION IN USA

Year	Population	Share (%) of 65 years and above	Share (%) of 75 years and above
1950	150,607,361	8.1	2.6
1960	179,323,175	9.2	3.1
1970	203,211,926	9.9	3.8
1980	226,545,905	11.3	4.4
1990	248,709,873	12.6	5.2
2000	281,421,906	12.4	5.9
2004	293,655,404	12.4	6.1
2006	296,496,649	12.4	6.1
2010	308,935,581	13.0	6.1
2020	335,804,546	16.3	6.8
2030	363,584,435	19.7	9.2
2040	391,945,658	20.4	11.4
2050	419,853,587	20.7	11.8

Source: Health – United States, 2006; US Department of Health and Human Services, DHHS Publication, November 30, 2006.

Annexure - 5

INCREASING SHARE OF AGEING POPULATION IN SELECT EUROPEAN COUNTRIES

Country	Share (%) of Population aged 65 and above	
	2003	2015(P)
Austria	16.0	19.5
Belgium	16.8	19.5
Czech Republic	13.9	18.6
Denmark	14.9	19.2
Finland	15.3	20.3
France	16.1	18.5
Germany	17.3	20.8
Italy	19.0	22.3
The Netherlands	14.0	17.4
Norway	14.0	18.0
Spain	17.1	19.2
Sweden	17.5	21.4
Switzerland	15.6	22.0
United Kingdom	16.0	17.8

Source: Public Health Action for Healthier Children and Population, The European Health Report, 2005; World Health Organisation, 2005

(P) – Projected

Annexure - 6

SHARE OF POPULATION WITH NO HEALTHCARE INSURANCE IN USA

Year	Share (%) of Population with No Healthcare Insurance in USA
1984	14.5
1989	15.6
1994	17.5
1995	16.1
1996	16.6
1997	17.5
1998	16.6
1999	16.1
2000	17.0
2001	16.4
2002	16.8
2003	16.5
2004	16.4

Source: Health – United States, 2006; US Department of Health and Human Services, DHHS Publication, November 30, 2006.

Annexure - 7

TOP SURGICAL AND NON-SURGICAL COSMETIC PROCEDURES UNDERTAKEN BY AMERICANS IN 2006

Procedure	No of Women	No of Men
Surgical		
Liposuction	402946	53263
Breast Augmentation	364610	—
Eyelid Surgery	198099	27602
Abdominoplasty	164073	—
Rhinoplasty	—	33143
Breast Reduction	160531	23670
Facelift	—	14051
Non-Surgical		
Botox	2881119	300472
Hylaform Restylane	1519923	73634
Laser Hair Removal	1308739	166557
Microdermabrasion	921970	71102
Laser Skin Resurfacing	530147	48451

Source: The American Society for Aesthetic Plastic Surgery, USA;
http://www.surgery.org/public/consumer/trends/cosmetic_surgery_trends

Annexure - 8

MAJOR FORMS OF TRADITIONAL MEDICINE PRACTISED IN THE WORLD

Major forms of traditional therapies practiced in the world include:

Acupressure

Using the acupuncture points, pressure from the fingers is applied where appropriate.

Acupuncture

Fine needles are inserted into the body at meridians or energy centres. This 'unblocks' or regulates the CHI energy circulating in the body, which in turn, stimulates the healing process. There is a mass of Chinese research but western science does not yet accept the principle.

Alexander Technique

F.M.Alexander (1896-1955) was an Australian actor who lost his voice. He realigned his posture and found the voice returned. The technique is to persuade the body to return to its normal position and so allow the brain to recognise and retain the realignment. The head and neck positioning are particularly important.

Auricular Acupuncture

The ear has a number of meridian points and can be used to affect the whole body. There has been some research using this method of treatment for drug addiction.

Ayurveda

An ancient Indian system of medicine of preventative medicine and treatments, which includes diet, yoga and meditation.

Bach Flowers

These formulae were developed by Dr Bach as an offshoot of homoeopathic medicine. The usefulness of this lies in the fact that the remedies can be an effective treatment of mood swings and emotional conditions. The remedy for shock and other upsets is considered particularly helpful.

Bates Method

Exercises to improve muscle control of the eyes which were developed by Dr William Bates in the USA. The treatment follows the naturopathic idea of stimulating blood flow by the use of warm or cold-water baths but, in this case, the eyes are splashed alternately.

Biodynamic Massage

In common with all complementary medical treatments, the vital force is perceived to affect all the organs of the body. The link between the psyche and the physical was further developed by Gerda Boyesen in the Norwegian hospital service in the late 1960s. where she used massage to remove emotional trauma from organs of the body. She claimed to detect the variations in health by monitoring the fluid sounds through her stethoscope.

Bowan Therapeutic Touch

Light touch used in certain sequences appears to release energy blockages. Probably based on the Chinese concept of CHI, Chapman's reflexes and other healing techniques, this system is being shown to work although it is not yet fully understood.

Chelation Therapy

Cardiovascular treatment which uses ethylene diamine tetra acid (EDTA) as part of a naturopathic programme to help clear blocked arteries.

Chiropractic

Manipulation of the spine and movement of the extremities attributed to D.D. Palmer in about 1890. Chiropractors vary in their approach. Some give extended massage before treatment whilst others do not.

MacTimoney Chiropractic

The MacTimoney method is more subtle and is claimed to induce the natural healing process.

Chinese Medicine

Has much in common with other Eastern systems and is the foundation of many techniques currently used in the West. Provides a comprehensive range of treatments for problems arising from imbalances at physical, mental, emotional and spiritual parts of the consciousness.

Colonic Hydrotherapy

Warm water is pumped into the colon and the residues of fecal matter and other deposits can be cleared. The central point is that poisons and fecal matter are flushed out and replaced with beneficial bacteria. Best used in conjunction with nutritional advice.

Colour Therapy

The benefits of coloured light on the skin is well known and the colour practitioner will diagnose and provide the appropriate coloured light to help bring back health and well-being. There are other systems such as detecting the colours in the energy field of the individual and providing the tints which will help achieve a return to the normal. This is often practised by healers with the gift of extended perception either by sight or touch. Colour can be used in the choice of clothing and furnishings since they affect the mood and attitude of mind.

Cranial Osteopathy

Developed by Dr William Sutherland in the 1930's, as an extension of the ancient Chinese Tuina and Osteopathic techniques. The process appears to rely on the practitioner's healing energies directed into the head and neck. Practitioners

claim to feel a slight movement in the bones of the skull which sceptics claim is not possible.

Crystal Healing

Crystals transmit energy which is claimed to be able to tune to the bodies fluctuating vibrations. Crystals are chosen according to their energy and the needs of the patient.

Dolphin Therapy

Swimming with dolphins has shown that many patients have improved their quality of life and regained their physical energies.

Feldenkrais

Enables the person to recognise the relationship between different areas of the body and breakdown any unhelpful movement patterns which are causing distress. Moshe Feldenkrais was an Israeli judo expert who devised the sequences of movement.

Flotation

Floating in water in a darkened pool amounts to sensory deprivation and this can trigger healing. The support of the water, which often contains Epsom salts, can rest injuries and help the patient to achieve a good balance between the left and right cortex of the brain.

Geopathic Stress

The concept of energy patterns, which are created by the Earth, can adversely affect the human body. Treatment is to move away from the offending energy pathways.

Gerson Therapy

Dr Max Gerson devised this nutritional regime for cancer and other health conditions. The programme aims to re-energise the body's own immune response.

Healing

The healing energy is part of every person and normally provides a repair and regeneration process for every injury and disease we get. Certain people are able to channel these energies

Healthcare Tourism: Opportunities for India

to assist others who are ill and thus help them to 'jump start' their own immune healing mechanism again.

Hellerwork

Joseph Heller used deep tissue massage together with psychotherapy and postural re-alignment. A pupil of Dr Ida Rolf (Rolfing), Heller broke away from Rolfing because his technique also used counselling.

Herbal Medicine

Herbs are used in both eastern and western medicine. The aim is to use all parts of the herb and particular emphasis is laid on the energetic content of the herbs and its ability to stimulate healing. Thus the method of picking the herb and the time of day can affect the potency. The whole herb has a wider healing potential than the single active agent used by the pharmaceutical industry.

Holism

Generally regarded as a word from HOLOS – Greek for whole. In Complementary Medicine the whole is seen as more than the sum of the parts and describes treatments, which are focussed on the physical, mental, emotional, vital force, spirit and soul.

Homoeopathy

Hippocrates and Samuel Hahnemann (1796) are credited with using the homoeopathic principle. This means treating the vital force to enable the body to re-energise its own repair mechanisms. The Homoeopathic remedy does not treat the presenting symptom but the body's ability to heal itself with the result that prescriptions for the same named disease will probably be different in each case.

Hydrotherapy

Bathing in water has been used throughout history but the mineral baths which were opened during the nineteenth century in the UK and Europe claimed the most successful treatments.

Hypnotherapy

This is not just hypnosis but a partnership between practitioner and patient which aims at defining the cause of the problem

thereby helping the patient to overcome it in their own way and over a time scale of their choice.

Iridology

Diagnosis from the iris of the eye which are the exposed nerve endings seen as the coloured area. There is little reliable research but qualified practitioners appear to be able to make a significant contribution to helping the patient to understand those parts of the body which need attention.

Kosmed

The Kosmed is the Russian trade name for an instrument which can be used to assess lowered energy levels or 'blockages' of parts of an energy pathway in the human body. The instrument will then transmit the appropriate energy to bring back balance and so allow the life energy to flow again. Can be used to reduce pain.

Manipulative Medicine

Based on massage techniques and structural manipulation. When used in the ancient Chinese way, the whole emphasis is on gentleness and encouraging the muscles to relax before attempting to help to re-align the bones. Attempting to make adjustments before this relaxation has been completed can result in considerable pain and the change may not be permanent. In these cases, many treatments will be required which is not the case when the preliminary work is correctly completed.

Music Therapy

Sound and music produce vibrations and these can have marked effects on the healing process.

Naturopathy

The Naturopath will have many different treatments to offer but all are based on the concept that the body will heal itself if given the right stimulus.

Neuro-linguistic Programming

Looks at behavioural traits and bad habits. Treatment provides the patient with verbal instructions to reverse the trends.

Nutritional Therapy

The diet can have dramatic influences on our health and well being. If we recognise that the body chemistry of each person is different, the need for different diets is apparent.

Orthomolecular Therapy

Developed by Nobel Prize Winner Linus Pauling who postulated that provided one has the correct level of vitamin, mineral and nutritional input, the body can overcome disease.

Osteopathy

Structure governs function is the tenet of osteopathy. Andrew Taylor Still is given credit for initiating the system at the end of the American Civil War but there is much in common with Chiropractic and the eastern techniques of ensuring that the skeleton is in correct alignment so that nerves are not pinched.

Oxygen Therapy

Forms of oxygen (ozone) have been used in many contexts from water purification to a disinfectant in the bottling industry. As a treatment, it has been recognised that harmful bacteria and viruses can only live in a low oxygen environment. Treatments vary from sitting in a 'steam' bath and being surrounded by ozone to treating the blood by passing ozone through it and clearing impurities. Dr Otto Warburg proved that cancer cannot live in a high oxygen environment.

Pilates

Specific exercises to correct the posture first developed by Joseph Pilates in the USA. Now available in the UK.

Polarity Therapy

Healing system having much in common with Ayurveda. Developed in Austria by Randolph Stone in the 1920s, the idea is that parts of the body have a positive charge whilst others are

negatively charged. Treatments consist of trying to bring the body into 'balance' using counselling, healing, exercise and nutrition.

Pranic Healing

Prana is the Sanskrit word for 'life force'. The traditional healer interacts with the patient's aura or energy field to allow an interaction of healing energy to take place.

Qi Gong

Qi Gong is a part of Traditional Chinese Medicine and means energy practice involving the transmission of the healing energy into the patient.

Radionics

Dr Albert Abrams and Ruth Drown were among those who developed Radionics on the premise that disease produces its own unique energy vibration. The Radionic instrument is used to focus the healer's mind on the relevant vibration so that healing can be transmitted.

Reflexology

The principle is that all the organs in the body are reflected on the foot or hand. By pressing the relevant point, healing can be transferred to the particular area in need. Original practitioners thought that crystals of lactic acid which caused sensitivity must be crushed to enable healing to take place. The pain was often considerable and this process has been superseded with more gentle methods.

Reflex Touch

This is a development associated with Patricia Morrell who achieved success with her methods of diagnosis and light touch (Morrell Reflexology) which have been further refined.

Reiki

A Japanese healing discipline developed by Mikao Usui. The principles are similar to most other healing techniques except that the system follows a pre-determined set of hand positions which form the basis for each treatment. The system relies on the

Healthcare Tourism: Opportunities for India

development of the student's ability to transfer the healing energy and this may take considerable time. Some courses offer a mastership in three weekends.

Rolfing

Dr Ida Rolfe developed this treatment under the premise that muscles had a 'memory' which could cause problems unless controlled by the patient. The Rolfer works on connective tissue of the myofascial system to break down tension and create a better balanced body.

Shiatsu

A Japanese system similar to acupuncture without the needles. The practitioner may use elbows, feet, knees and fingers to transfer the Qi or vital energy to balance the whole body of the patient.

Sports Massage

Particular treatments aimed at maintaining the strength and muscle power of the sports person. Emphasis is usually on prevention.

Swedish Massage

Common system of massage using kneading, stroking and pummelling to achieve relaxation and increased circulation of the blood.

Tai Chi

Part of Traditional Chinese Medicine. Flowing slow movement and breathing techniques stimulate and regulate the flow of Chi energy.

Traditional Chinese Medicine

The basis of much ancient healing wisdom which also shows a similarity to other traditional systems in both thought and delivery of treatment. The belief stems from the concept of Ying and Yang – Yin being about the feminine traits, quiet calm and introspection whilst Yang represents loudness, light and masculine traits. These must be balanced to achieve health and well-being. Treatments include exercise and manipulation (Tuina), herbal medicines, healing (Qi Gong) and acupressure amongst others.

Tragerwork

Tragerwork is a light and gentle form of massage which does not use oil or rubbing. The main new idea is the use of mental gymnastics (mentastics) which has had success in reducing pain

Tuina

Massage in the Chinese way meaning pull and grasp. Baby Tuina was developed about 750 years ago when mothers were taught to 'stroke' their babies to achieve relaxation.

Yoga

Indian medicine places much emphasis on prevention, and yoga is used with that in mind. There are many different types of yoga postural and stretching exercises and the student is always advised to go to a qualified teacher.

Zone Therapy

Another name for reflexology. Healing treatment is given to the zones of the foot which appear to reflect the sensitivity of certain organs.

EXPORT-IMPORT BANK OF INDIA

Centre One Building, 21st Floor,
World Trade Centre Complex,
Cuffe Parade, Mumbai 400 005.
Phone : (91 22) 22185272
Fax : (91 22) 22182572
E-mail : cag@eximbankindia.in
Website : www.eximbankindia.in

Indian Offices

AHMEDABAD

Sakar II, 1st Floor,
Next to Ellisbridge Shopping Centre
Ellisbridge P.O. Ahmedabad 380 006.
Phone : (91 79) 26576852, 26576848;
Fax : 26578271
Email : eximbankahro@dataone.in

BANGALORE

Ramanashree Arcade, 4th Floor,
18 M. G. Road, Bangalore 560 001
Phone: (91 80) 25585755/25589101-04; Fax : 25589107
Email : eximbro@eth.net

CHENNAI

UTI House, 1st Floor,
29, Rajaji Salai, Chennai 600 001.
Phone : (91 44) 25224714, 25224749
Fax : (91 44) 2522 4082
Email : chro@dataone.in

GUWAHATI

Sanmati Plaza, 4th Floor,
Near Sentinel Building,
G. S. Road, Guwahati 781 005
Phone : (91 361) 2462951 / 2450618; Fax : 2462925
Email : gro@eximbankindia.in

HYDERABAD

Golden Edifice, 2nd Floor,
6-3-639/640, Raj Bhavan Road, Khairatabad,
Hyderabad - 500 004.
Phone : (91 40) 23307816-21; Fax : 23317843
Email : eximhyd@vsnl.net

KOLKATA

Vaniya Bhavan (International Trade Facilitation Centre),
4th Floor, 1/1 Wood Street, Kolkata 700 016.
Phone : (91 33) 22833419 - 22833420; Fax : 22891727
Email : eximca@dataone.in / eximca@vsnl.com

MUMBAI

Maker Chambers IV, 8th Floor,
222 Nariman Point, Mumbai 400 021.
Phone : (91 22) 22823320; Fax : 22022132
Email : eximwrrro@vsnl.com

NEW DELHI

Statesman House, Ground Floor
148, Barakhamba Road, New Delhi 110 001
Phone : (91 11) 2332 6254/2332 6625
Fax : (91 11) 2332 2758, 23321719
Email : eximnd@vsnl.com

PUNE

44, Shankarseth Road, Pune 411037
Phone : (91 20) 26458599; Fax : 26458846
Email : eximpune@vsnl.com

Overseas Offices

DAKAR

First Floor, 7,
rue Félix Faure,
P.O. Box No. BP50666
Dakar, Senegal.
Phone : (00 221) 338232849
Fax : (00 221) 338232853
Email : eximdakar@eximbankindia.in

DUBAI

Level 5, Tenancy, 1B
Gate Precinct Building No. 3,
Dubai International Financial Centre,
P.O. Box No. 506541
Dubai, UAE
Phone : (009714) 3637462
Fax : (009714) 3637461
Email : exim.dubai@dubaiinternetcity.net

JOHANNESBURG

158, Ground Floor, Jan Smuts,
9, Walters Avenue, Rosebank
Johannesburg 2196, South Africa
Phone : (0027 11) 4428010, 4422053
Fax : (0027 11) 4428022
Email : eximindia@icon.co.za

LONDON

88/90, Temple Chambers
3-7 Temple Avenue
London EC4Y OHP
United Kingdom
Phone : (0044) 2073538830
Fax: (0044) 2073538831
Email : eximlondon@eximbankindia.in

SINGAPORE

20, Collyer Quay, # 10-02 Tung Centre,
Singapore 049319
Phone : (0065) 6532 6464
Fax : (0065) 6535 2131
Email : eximbank@singnet.com.sg

WASHINGTON D.C.

1750 Pennsylvania Avenue NW.
Suite 1202,
Washington D.C. 20006
United States of America
Phone : (001 202) 2233238
Fax : (001202) 7858487
Email : indexim@att.net