

# A comparative study on the number of Patients sent Abroad for treatment by the Kingdom of Saudi Arabia

\*Zuber Mujeeb Shaikh

Director of Corporate Quality Improvement, Dr. Sulaiman Al-Habib Medical Group, Riyadh, Kingdom of Saudi Arabia

---

## ARTICLE DETAILS

### Article History

Published Online: 05 July 2018

### Keywords

Patients, Ministry of Health (MOH), Kingdom of Saudi Arabia

### \*Corresponding Author

Email: drzuber5[at]yahoo.co.in

---

## ABSTRACT

This paper focuses and analyse the number of patients sent abroad for treatment by the Kingdom of Saudi Arabia in the year 2006, 2011 and 2016. **Objectives:** To compare and analyse the number of patients sent abroad for treatment by the Kingdom of Saudi Arabia in the year 2006, 2011 and 2016. **Research Methods:** It is a descriptive and comparative research study in which historical data was analysed (Library Research). **Significance of Research:** There is a growing demand of healthcare services in the Kingdom of Saudi Arabia and the Saudi Arabian General Investment Authority has identified healthcare as a priority sectors for investment and nationalization for employment. Moreover, the amount spent on the treatment abroad on the Saudi nationals in increasing every year. **Research Design:** The number of patients sent abroad for treatment by the Kingdom of Saudi Arabia in the year 2006, 2011 and 2016 were compared and analysed by using the percentages. **Study Population:** This research is limited to the number of patients sent abroad for treatment by the Kingdom of Saudi Arabia in the year 2006, 2011 and 2016. **Data Collections:** The data were collected from the annual reports of Ministry of Health, Kingdom of Saudi Arabia for the years 2006, 2011 and 2016, relevant published journals, articles, research papers, academic literature and web portals. **Conclusion:** This research revealed that there is an increase in the percentage of total number of patients sent abroad for treatment by Riyadh Commission 114.25% (2006-2016); Jeddah Commission by 245.74% (2006-2016); Eastern-Commission by 590.91% (2006-2016); Aseer-Commission by 1416.67% (2006-2016). However, there is a decrease in the percentage of total number of patients sent abroad for treatment by Jeddah Commission by 39.89% (2006-2011). Hence, there are good opportunities in the Kingdom of Saudi Arabia for investment and employment for the Saudi nationals in the healthcare service sector. Hence, there are enormous opportunities in the Kingdom of Saudi Arabia for the investment of international and national entrepreneurs and employment for Saudi nationals in the lucrative healthcare service industry.

---

## 1. Introduction

In Saudi Arabia, the Ministry of Health was founded in the year 1950.<sup>1</sup> In the year 1925, Saudi Arabia's first public health department was established in Makkah.<sup>2</sup> The department was responsible for building hospitals and healthcare centres and issuing and enforcing regulations to provide the necessary standards for practicing medicine and pharmacology. A public health council was also established to address the growing need for healthcare services and it was the highest-level supervisory board, overseeing all aspects of the country's healthcare services. Then, these healthcare institutions were transformed into a ministerial body in 1950.<sup>3</sup> Abdullah bin Faisal Al Saud was the first health minister.<sup>4</sup> The ministry is based in Riyadh.<sup>5</sup> Healthcare services in Saudi Arabia are provided by several public and private agencies. However, the ministry is the major planner and provider of these services.<sup>6</sup> Public expectations and increasing financial pressures are requiring health services to adopt new approaches to the management of their resources.

Saudi Arabia is a high-income country with a per capita GDP of US\$ 22 713.4 in 2010 and an equally high human development index ranking, 56 in 2011.<sup>7</sup> The extensive health care system divided among three tiers of care and caters for a

population of approximately 27 million (2010). The Ministry of Health is the main provider of health care services. Health has featured in the national 5-year development plans since 1970, and is seen as a key part of overall development in the country. Saudi Arabia is on track to achieve the Millennium Development Goals (MDG) targets. The development plans indicates that there is an extensive progress has been made in economic development. As a result of the strong economy, the country has rapidly expanded health, education and social services infrastructure.

The Ministry of Health is promoting quality assurance and improvement through use of standard operating procedures and accreditation of health care facilities. Efforts are being made to improve patient safety in both public and private health facilities. The cost of health services in the private sector is perceived as high and results in out-of-pocket expenditures, particularly for workers in the public sector, which are not covered by supplementary private health insurance. Until recently, foreign workers were not allowed to use Ministry of Health facilities except for emergencies.<sup>8</sup>

A target of Vision 2030 is greater participation of the private sector within the economy and this is especially so of healthcare. There is a definite move towards privatisation with a

stated objective in the National Transformation Program 2020 (NTP) of increasing private healthcare expenditure from the current 25 per cent to 35 per cent of total expenditure by 2020. This represents a projected increase in revenue generated from 3 Billion Saudi Arabian Riyals (SAR) to 4 Billion SAR. In addition to this, the Ministry of Health plans to spend over 23 Billion SAR on new initiatives over the next 5 years.<sup>9</sup>

Vision 2030 aims to provide healthcare through public corporations, both to enhance quality and to prepare for privatization in the longer term. Overall, the private sector is offering lucrative opportunities but it also faces difficulties, such as high capital costs, problems in attracting quality doctors and nurses, and funding constraints for new entrants. To overcome the shortage in human resources, both the private and public sectors are looking to establish more medical and nursing colleges.<sup>10</sup>

## 2. Review of Literature

Saudi Arabia has the largest and one of the fastest growing populations in the Gulf Cooperation Council (GCC) with over half the population under 40. Reported estimates suggest that it will rise from its current 32.7 million to 34.7 million by 2020. This will have a dramatic effect on demands for healthcare, especially as demographic trends suggest that the population will change from Baby Boomers to Generation X, Y & Z. During 2010, the population above 60 years was 1.1 million, and it is estimated that by 2020, that population will cross 2 million. This shift will have an impact on disease patterns and the type of healthcare services required. As the number of patient's increases, the impact on the capacity of hospital beds will be significant. In 2016, \$33.3 billion was allocated for health and social affairs (14.9% of the budget). It was the third highest allocation, after education with \$55 billion, and military with \$47.7 billion. The increased budget will uplift the Kingdom's healthcare sector by building 38 new hospitals, with a total capacity of 9,100 beds, in addition to two medical cities accommodating 2,350 beds.<sup>11</sup>

The Kingdom has spent more than Saudi Riyal one billion to treat 4,723 Saudi patients abroad during 1434 Hijri. The General Director of the Medical Authorities and Medical Attaches, said that the High Medical Commission approved 2,781 patient cases, while the remaining patients were treated abroad on royal decrees. The patients received treatment in countries such as the United States, the United Kingdom, Germany, Singapore and China. The United States remains the top destination for medical treatments followed by Germany and the United Kingdom. The decision to treat patients abroad is based on a royal decree or a recommendation made by the High Medical Commission, which deals with these acute cases. Members of the commission are representatives from various health departments such as the medical services department at the Ministry of Defense, the department of health affairs at the Ministry of National Guard, the medical services department at the Ministry of Interior, King Faisal Specialist Hospital and Research Center, university hospitals and the Ministry of Health.

There is no ceiling for overseas medical allocations and all deserving patients will be given the needed opportunity for

medical treatment abroad. There are 18 medical committees spread throughout the Kingdom to deal with such cases. The Kingdom has also appointed three attachés in the United States, Germany and the United Kingdom. The Saudi missions abroad have been instructed to identify the right hospitals for overseas treatment and the patients are informed accordingly. The process of referring cases to be treated abroad involves studying each case objectively, scientifically, practically and fairly to reach the best decision, bearing in mind the patient's best interests. The Ministry of Health (MOH) facilitates visas and arranges transport for patients and their companions by commercial or medical evacuation aircraft. Royal directives stipulate that companions must be both Saudis and also first-degree relatives.<sup>12</sup>

The total cost of treating patients referred by the Ministry of Health (MOH) for treatment abroad in 2012 reached SR 813,662,113 million. They received their treatment in the hospitals of the United States of America (the U.S.A.), the United Kingdom, and Germany, as well as Singapore and China.<sup>13</sup>

In the recent research on the Health Resources Indicators of the Ministry of Health, Kingdom of Saudi Arabia (Shaikh, 2018) it was revealed that there is an increase in the Physicians by 38.73%, Dentists by 88.84%, Pharmacists by 118.84%, Nurses by 61.02%, Allied Health personnel by 77.89%, Private hospital beds rate by 3.77% rates per 10,000 populations as compared with the year 2006. However, there is a decrease in the Hospital beds by 3.04%, Health Centers by 13.58%, Governmental hospital beds 25.84% rates per 10,000 populations as compared with the year 2006.<sup>14</sup>

A comparative study on the Economic Indicators of Ministry of Health, Kingdom of Saudi Arabia (Shaikh, 2018) revealed that there is an increase in the GDP per capita (in US Dollars) by 37.32% and MOH Budget (Percentage of Governmental Budget) by 16.83 % in the year 2016 as compared to the year 2006.<sup>15</sup>

A comparative study on the Demographic Indicators of the Kingdom of Saudi Arabia, Ministry of Health (Shaikh, 2018) revealed that there is an increase in the total estimated population by 34.05%, total Saudi population by 16.26%, total non-Saudi population by 81.90%, annual population growth rate by 9.48%, population of 15-64 years by 1.65%, population from 65 & above by 48.93%, total life expectancy at birth by 2.33%, life expectancy at birth-male by 1.94%, life expectancy at birth-female by 2.70% in the year 2016 as compared to the year 2006. However, there is decrease in the population under 5 years by 8.62%, total fertility rate by 25.47%, crude birth rate per 1000 population by 30.80% and population under 15 years by 7.75% in the year 2016 as compared to the year 2006.<sup>16</sup>

## 3. Data Analysis

The data was collected from the Ministry of Health, Statistical Year Books, Kingdom of Saudi Arabia for the years 2006, 2011 and 2016 and tabulated in order to compare by using the statistics. The Statistical Yearbook is like a mirror, reflecting the statistical activities and the various achievements of the health sectors in the Kingdom of Saudi Arabia throughout

the year that made the Ministry of Health put the book accessible to readers.

**Table Number 1- Total Number of patients sent abroad for Treatment per Commission in 2006, 2011 and 2016**

Sr. No.	Regional Health Commissions/ Years	2006 <sup>17</sup>	2011 <sup>18</sup>	2016 <sup>19</sup>
1	Riyadh-Commission	351	508	752
2	Jeddah-Commission	188	113	650
3	Eastern-Commission	33	51	228
4	Aseer-Commission	6	53	91
	<b>Total</b>	<b>578</b>	<b>725</b>	<b>1721</b>

Table number 1 depicts the number of hospitals in all health care sectors of Saudi Arabia

**Table Number 2- Total Number of patients sent abroad for Treatment per Commission in 2006, 2011 and 2016 and its comparison between the years**

Sr. No.	Regional Health Commissions/ Comparison between Years	2006-2011	2011-2016	2006-2016
1	Riyadh-Commission	44.73%	48.03%	114.25%
2	Jeddah-Commission	-39.89%	475.22%	245.74%
3	Eastern-Commission	54.55%	347.06%	590.91%
4	Aseer-Commission	783.33%	71.70%	1416.67%
	<b>Total</b>	<b>25.43%</b>	<b>137.38%</b>	<b>197.75%</b>

Table number 2 depicts that there is an increase in the percentage of total number of patients sent abroad for treatment by Riyadh Commission 44.73% (2006-2011), 48.03% (2011-2016) and 114.25% (2006-2016); Jeddah Commission by 475.22% (2011-2016) and 245.74% (2006-2016); Eastern-Commission by 54.55% (2006-2011), 347.06% (2011-2016) and 590.91% (2006-2016); Aseer-Commission by 783.33% (2006-2011), 71.70% (2011-2016) and 1416.67% (2006-2016). However, there is a decrease in the percentage of total number of patients sent abroad for treatment by Jeddah Commission by 39.89% (2006-2011).

#### 4. Conclusion

This research revealed that there is an increase in the percentage of total number of patients sent abroad for treatment by Riyadh Commission 114.25% (2006-2016); Jeddah Commission by 245.74% (2006-2016); Eastern-Commission by 590.91% (2006-2016); Aseer-Commission by 1416.67% (2006-

2016). However, there is a decrease in the percentage of total number of patients sent abroad for treatment by Jeddah Commission by 39.89% (2006-2011). Hence, there are enormous opportunities in the Kingdom of Saudi Arabia for the investment of international and national entrepreneurs and employment for Saudi nationals in the lucrative healthcare service industry.

#### Limitations of the Study

This study is limited to the number of patients sent abroad for treatment by the Kingdom of Saudi Arabia for the years 2006, 2011 and 2016.

#### Directions for Future Research

In future, such research studies should be conducted to compare the national healthcare indicators in order to oversee the improvement on an annual basis and to formulate or amend the national policies or strategies for improving the national healthcare services.

#### Sources of Funding for the Study

This research was self-financed by the author himself.

#### Implications of the Findings

The Ministry of Health, Kingdom of Saudi Arabia should develop the policies and strategies based on these findings in order to improve the healthcare services in the Kingdom.

#### Acknowledgement

The author would like to thank the Ministry of Health of the Kingdom of Saudi Arabia.

#### Disclaimer

This publication contains information obtained from authentic and highly regarded sources. Reasonable effort has been made to publish reliable data and information, but the author and the publisher cannot assume responsibility for the validity of all materials or for the consequences of the use.

*All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted, in any form, or by any means, electronic, mechanical, photocopying, recording or otherwise, without prior permission, in writing, from the publisher or the author.*

#### References

1. [https://en.wikipedia.org/wiki/Ministry\\_of\\_Health\\_\(Saudi\\_Arabia\)](https://en.wikipedia.org/wiki/Ministry_of_Health_(Saudi_Arabia))
2. "Kingdom of Saudi Arabia Ministry of Health Detects System Threats and Policy Violations 25% Faster with Fewer Analysts".
3. David E. Long (1 January 2005). *Culture and Customs of Saudi Arabia*. Greenwood Publishing Group. p. 15. ISBN 978-0-313-32021-7.
4. Ahmad, Mahmoud (9 May 2007). "Abdullah Al-Faisal Passes Away". Arab News.
5. Basic addresses OSCE. September 2011.
6. Mohammed H. Mufti (29 February 2000). *Healthcare Development Strategies in the Kingdom of Saudi Arabia*. Springer Science & Business Media. p. 9. ISBN 978-0-306-46314-3.
7. *Human Development Reports 2011 and 2010*. United Nations Development Programme
8. *Saudi Arabia and Political, Economic & Social Development, May 2017 Report*

- [https://www.saudiembassy.net/sites/default/files/whitepaper\\_development\\_may2017.pdf](https://www.saudiembassy.net/sites/default/files/whitepaper_development_may2017.pdf)
9. <https://www.tamimi.com/law-update-articles/vision-2030-and-the-opportunities-it-represents-in-healthcare-in-saudi-arabia/>
  10. Mansoor Ahmed, 05-Jun-2017, Forbes Middle East Healthcare, Saudi Arabia Looks To The Private Sector To Meet Growing Healthcare Demands.
  11. Mansoor Ahmed, 05-Jun-2017, Forbes Middle East Healthcare, Saudi Arabia Looks To The Private Sector To Meet Growing Healthcare Demands.
  12. Arab News, Saudi Riyal one billion spent on treating Saudis abroad (Arab News-December 23, 2013)
  13. The MOH Spends more than SR 800 Million for Treating Patients Abroad 26 November 2013, (<https://www.moh.gov.sa/en/Ministry/MediaCenter/News/Pages/news-2013-11-26-001.aspx>)
  14. Shaikh, Z. (2018). A comparative study on the Health Resources Indicators of the Ministry of Health, Kingdom of Saudi Arabia. RESEARCH REVIEW International Journal Of Multidisciplinary, 3(6), 185-188. doi: 10.5281/zenodo.1285900.
  15. Shaikh, Z. (2018). A comparative study on the Economic Indicators of Ministry of Health, Kingdom of Saudi Arabia. RESEARCH REVIEW International Journal Of Multidisciplinary, 3(6), 175-177. doi: 10.5281/zenodo.1285887.
  16. Shaikh, Z. (2018). A comparative study on the Demographic Indicators of the Kingdom of Saudi Arabia, Ministry of Health. RESEARCH REVIEW International Journal Of Multidisciplinary, 3(6), 167-171. doi: 10.5281/zenodo.1285883.
  17. Kingdom of Saudi Arabia, Ministry of Health, Health Statistical Year Book, 2006
  18. Kingdom of Saudi Arabia, Ministry of Health, Health Statistical Year Book, 2011
  19. Kingdom of Saudi Arabia, Ministry of Health, Health Statistical Year Book, 2016