

Key Factors and Requirements of Medical Centers to Enter the Medical Tourism Industry in Iran

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Abstract

Background: According to the World Tourism Organization, the tourism sector will significantly influence the global economy and international trade, especially from 2020 to 2030, with medical tourism emerging as the largest and fastest-growing economic sector worldwide. This research focused on pinpointing and ranking essential factors and requirements of medical centers to engage in the Medical Tourism Industry in Iran.

Methods: This study was conducted using a mixed qualitative and quantitative approach. The sample included 40 experts in tourism and medical tourism who were selected purposefully. Data collection was conducted using a researcher-made form and a structured questionnaire for prioritizing. Qualitative content analysis and analytic hierarchy process (AHP) were used to analyze data. The obtained data were analyzed using Expert Choice software version 11.

Results: In the first phase, 210 codes were identified, which were grouped into 6 categories and 40 factors. These categories included policy, economic, information and marketing, human, health infrastructure, and diversity and quality of health services. The greatest weight or priority was related to diversity and quality of health services, with a weight of 0.352, while the lowest weight or priority was related to information and marketing, with a weight of 0.011.

Conclusions: Iran can make its role in this market more prominent by investing as much as possible in its strengths and introducing them as its unique capabilities in providing services. In terms of points that can be corrected, it is possible to achieve the desired result by compiling comprehensive plans, marketing, and modifying some processes.

Keywords: Medical Tourism; Key Factors; AHP

1. Background

Health tourism has experienced the most rapid expansion in the tourism industry over the last 10 years. Medical tourism is a key sub-sector of health tourism (1-5). Medical tourism, a segment of health tourism, is a rapidly expanding industry globally, resulting in circumstances where patients travel internationally for medical services (6-8). According to WTO estimates, medical tourism can contribute to the solution of the employment problem more than 5% in developing countries. Moreover, this organization estimates extra revenue of about \$ 6.1 billion to be generated through medical tourism by the year 2020 (9). In 2007, medical tourism generated 4.3 billion dollars of extra revenue in Asia (10). After nearly 60 years of long-term development planning in Iran, attempts were made to obtain desirable future outcomes through resorting to modern concepts and tools for macro policy in early 2001, which resulted in the formulation and signification of Iran's 2025 outlook. Achieving the aims mentioned in the 2025 outlook depends on the identification of the main points of departure and determining the way to achieve these goals (11). It is estimated that there will be

annually more than 40 million domestic tourists and 20 million foreign tourists in Iran by 2025. Additionally, 7% of tourists travel for the treatment and use of natural resources (12). The fourth development plan of the country emphasized that advancing medical tourism is a legal requirement (13,14). Iran's tourism sector possesses significant potential for expansion and advancement. As per the WTO, Iran ranks tenth in the world in terms of archaeological and historical attractions and fifth in terms of natural attractions.

Therefore, the small share of Iran's health tourism in the world market reveals the failure of the policy-makers to develop a comprehensive and future-oriented program for medical tourism. In fact, the gap between the status quo and the ideal status regarding tourist attraction is very large. Several studies were conducted in this area describing the current requirements, prerequisites, as well as cultural and social factors. However, few studies propose a solution or plan to improve the current medical tourism in Iran (15-18). In a study conducted by Tourani et al, only opportunities and threats of medical tourism were addressed (16). Additionally, Jabbari et al generally



provided the components of medical tourism in Iran (19). In a review study, Delgoshaie et al explored the status of medical tourism in Iran on the basis of existing studies (20).

The current research highlights and ranks the factors and needs of medical centers aiming to enter the medical tourism market in Iran; therefore, the identified factors are more objective and grounded in the actual requirements of medical centers. In contrast, other studies do not focus on the needs of the centers and generally tend to define factors. Moreover, in the present study, the factors are prioritized, which has advantages over similar studies.

2. Materials and Methods

This descriptive study was conducted using a combination of various qualitative and quantitative research methods, and with respect to results, it was an applied research. In order to identify key factors affecting the medical tourism industry, the following steps were taken:

Phase 1

In the initial phase, alongside consulting specialists, essential elements and prerequisites for medical centers to join the Medical Tourism Industry in Iran were recognized.

Phase 2

The identified key factors and requirements were ranked through the analytic hierarchy process (AHP). To ensure a comprehensive and multidisciplinary perspective, 40 experts and professionals in the fields of medical tourism and general tourism participated in the study. The selection of participants was based on their expertise, institutional roles, and practical experience in the development, management, and policy-making of medical tourism in Iran. The participants were categorized into three main levels: national, mid-range (provincial and academic), and subordinate (operational and private sectors), as presented in Table 1.

The purposive sampling method was used to select participants. Inclusion criteria were having at least two years of experience in tourism or medical tourism or having education in tourism or related disciplines, posing responsibility in the planning and implementation, training, and research in the field of tourism or medical tourism. Finally, AHP and Expert Choice software version 11 were used to prioritize the factors.

3. Results

In the first phase, using interviews with 40 experts, common factors were integrated and a consensus was reached. A total of 210 codes were identified, which were

Table 1. Demographic Characteristics of the Participants

Level	Institute	Number
National	Ministry of Health	2
		1
	Iran Tourism Development Corporation (IRTDC)	1
	Cultural heritage and tourism organization	1
	Governor	1
Midrange	Cultural heritage and tourism in provinces	1
		2
		2
	University of Medical Sciences	6
		1
Subordinates	University accredited by the Ministry of Science, Research and Technology	1
		1
	Public hospitals	3
		3
	Private hospitals	2
		1
		1
	Research centers	1
		1
	Doctors (other than officials)	2
	Medical tourism companies	2
	Hoteliers and investors	2
	Hospital hotels	2
Total		40

grouped into 6 categories and 40 factors. This indicates the diversity and richness of the data. The codes were analyzed based on their similarities and differences. This analysis included identifying common patterns and themes. After analysis, the codes were divided into 6 main categories (main themes). These categories included policy requirements, economic requirements, information and marketing requirements, human requirements, health infrastructure requirements, and requirements related to increasing the diversity and quality of health services. Several steps were taken to identify sub-themes. First, all the identified codes were reviewed and a deep understanding of each code and its meaning was obtained. Then, the codes were divided into smaller groups based on their similarities and connections. For each group of codes, a main theme or topic was defined. This theme represented the general and main concept of the group of codes. For each main theme, related sub-themes were also identified, providing more details about the main theme.

Based on the results of the hierarchical analysis and pairwise comparisons, in terms of the diversity and quality of health services, the highest weight or priority was related to the factor of enhancing the quality of services provided in hospitals and treatment centers, with a weight of 0.305. In terms of infrastructure requirements, the highest weight or priority was related to the factor of providing advanced medical equipment in hospitals and treatment centers, with a weight of 0.417. Regarding human requirements, the highest weight or priority was associated with the factor of having experienced doctors in various specialties, with a weight of 0.334. Considering economic requirements, the highest weight or priority was related to the factor of the costs of medical services, with a weight of 0.342. Lastly, in policymaking requirements, the highest weight or priority is allocated to the factor of coordination of institutions related to medical tourism, with a weight of 0.301 (Table 2).

Based on the results of hierarchical analysis and pairwise comparisons in the overall requirements, the highest weight or priority was associated with the area of diversity and quality of health services, with a weight of 0.352. Conversely, the lowest weight or priority was linked to the area of information and marketing, with a weight of 0.011 (Figure 1).

4. Discussion

In the present study, 6 categories were identified: policy requirements, economic requirements, information and marketing requirements, human requirements, health infrastructure requirements, and factors related to enhancing the diversity and quality of health services. The findings align with results from other studies that have classified the factors influencing medical tourism. For instance, Zarei et al conducted research on the factors affecting the selection of medical tourism destinations in Iran. Their results indicated that key factors influencing the selection of Iran as a medical tourism destination

included religious considerations, the quality and standards of medical services, marketing and advertising channels, the attractiveness of Iran, the services provided by doctors, and the ease of travel and accommodation, which corroborates the findings of the current study (21). Additionally, Ratnasari et al explored sustainable medical tourism in Indonesia and Malaysia. They found that trust, communication interactions, the quality of medical services, affordable medical costs, modern medical technology, comprehensive services, heightened patient expectations, and transportation needs significantly affected medical tourism in these countries, further supporting the findings of the present research (22). Moreover, Çapar and Aslan investigated the factors that influence destination choice in medical tourism in Turkey. Their study highlighted the importance of access to healthcare services, security and safety levels, service quality, low costs, and tourism opportunities in the destination country (23). Dang et al applied grey system theory in a similar study to analyze the medical tourism industry and its economic implications. They emphasized the crucial role of tourism resources and healthcare infrastructure in promoting the tourism sector, while noting that cost advantages and marketing effectiveness received comparatively less attention (24). Overall, these studies reinforce the findings of the current research, particularly concerning the significance of economic factors and the quality of healthcare services.

In the realm of management, planning, policymaking, and legislation, several factors have been identified as crucial for the success of medical tourism. These factors include effective management, strategic planning, the development of a comprehensive medical tourism framework, and clearly defining the responsibilities of institutions, individuals, and contracts. Additionally, inter-departmental coordination between various sectors plays a vital role in enhancing medical tourism. Amin et al conducted a study focused on harmonizing international legal frameworks with Sharia principles in the context of medical tourism. They emphasized the necessity of international laws in managing medical tourism to ensure patient safety, uphold ethical standards, and facilitate the harmonization of procedures across borders. They concluded that legal frameworks must be considered (25). Sarabi Asiabar et al explored the economic, cultural, and political requirements necessary for advancing medical tourism in Iran using a fuzzy AHP. Their study highlighted the significance of political factors, noting that governments play a pivotal role in marketing and promoting the emerging medical tourism industry. Experts in this field assert that the involvement of government officials, policymakers, and decision-makers can significantly contribute to the growth and development of medical tourism (26), which aligns with the findings of the current study.

In the domain of medical tourism marketing and advertising, several key components have been identified as essential for success. These components include

Table 2. Priority and Weight of Key Factors Based on AHP

Categories	Key factors	Weight
Requirements related to increasing the diversity and quality of health services	Enhancing the quality of services offered in hospitals and medical centers to improve patient outcomes and foster a supportive healthcare atmosphere	0.305
	Achieving international quality certifications for hospitals and medical centers to demonstrate a commitment to excellence in patient care and ensure compliance with global healthcare standards	0.107
	Increasing appropriate amenities for patients and their companions in healthcare facilities to promote comfort, support, and overall well-being during the essential healthcare journey	0.082
	Ensure continuous monitoring of the patient's condition after hospital discharge to facilitate ongoing care, prevent complications, and support mental recovery	0.065
	Providing a diverse range of specialized services in hospitals to address patients' unique healthcare needs and ensure comprehensive and high-quality care	0.242
	Improving the quality of hotel-like accommodations in hospitals to provide a comfortable and supportive environment for patients and their families during their stay	0.148
	Establish an efficient response system for medical tourists in healthcare facilities to meet their unique needs, facilitate seamless communication, and ensure a positive healthcare experience	0.051
Health infrastructure requirements	Expanding hospital capacity to accommodate the growing patient population, increasing access to healthcare, and ensuring timely and effective treatment	0.011
	Establishing a dedicated hospital for medical tourists to provide appropriate healthcare services	0.202
	Equipping hospitals and healthcare centers with advanced medical technology to provide high-quality care, improve diagnostic accuracy, and enhance patient treatment outcomes	0.417
	Developing international flight services specifically for health tourists to ensure convenient access to medical care	0.043
	Implementing electronic payment facilities for patients to streamline transactions, increase convenience, and ensure a seamless financial experience	0.141
	Establishing a system of registration, control and statistics of medical tourists	0.034
	Establishing high-standard residential centers near medical facilities to provide comfortable accommodation for patients and their families	0.111
Human requirements	Facilitate domestic travel for medical tourists to ensure easy access to medical services, increase patient comfort, and promote a seamless healthcare experience within the country	0.041
	Availability of experienced doctors in various specialties to provide comprehensive healthcare	0.334
	Proficiency in foreign languages among specialist doctors to strengthen communication with international patients	0.092
	Implementing specialized medical tourism training for doctors and nurses to equip healthcare professionals with the necessary skills and knowledge	0.044
	Obtaining international certification for doctors to validate their expertise, enhance their professional credibility, and ensure compliance with global standards	0.064
	Building trust in the medical and treatment staff for ensuring a positive healthcare experience	0.234
	The prominence of Iranian doctors in their specialized fields and their contribution to global healthcare	0.232
Information and marketing requirements	Developing a coherent marketing strategy at both the micro and macro levels to effectively reach target audiences and optimize resource allocation	0.356
	Implementing effective promotional strategies for medical tourism in target countries to attract international patients	0.077
	Increase information system efficiency to improve data management, streamline operations, and ensure timely access to critical information	0.084
	The existence of the Iranian medical tourism brand and its growing reputation as a destination for high-quality and affordable healthcare services	0.273
	Developing medical advertising in the media and attracting international audiences	0.084
	Active presence of Iranian medical service centers in international sales and distribution channels	0.126

Table 2. Continued

Categories	Key factors	Weight
Economic requirements	Low cost of medical services, affordable treatments and reduced medical costs for international patients	0.342
	Affordable accommodation options for medical tourists	0.054
	Fixed and standard tariffs and uniform and regulated pricing for healthcare services	0.138
	Low cost of transportation for medical tourists	0.088
	Setting up an officially licensed foreign currency exchange center and establishing a regulated and authorized currency exchange facility	0.071
	Enhancing state investment in healthcare tourism development	0.133
	Facilitating the participation of private sector in healthcare tourism	0.174
Policy requirements	Formulation of effective policies and plans for the development of medical tourism by upstream institutions	0.041
	The existence of an institution among the policy makers	0.201
	Creating effective collaboration between medical centers and travel agencies	0.108
	Coordination of institutions related to medical tourism	0.301
	The preparation of different sectors of the tourism industry such as tour operators, hotels and travel agencies	0.152
	Adequate government support for the advancement of medical tourism in Iran	0.197

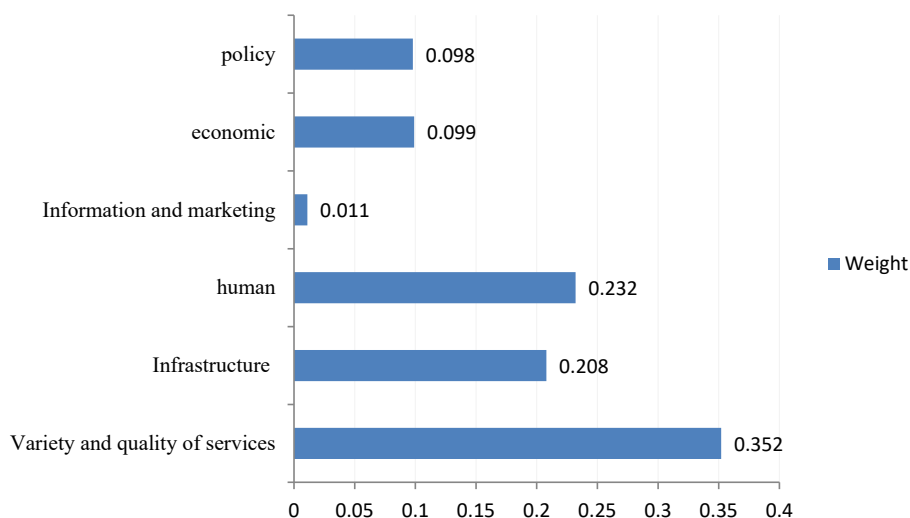


Figure 1. The Weight of each Category Based on AHP

the development of an advertising plan based on both domestic and foreign marketing research, identifying and assessing the treatment needs of other countries, strategizing to capture their market share, and promoting joint foreign investments in the medical tourism sector. In this context, Shafii et al conducted a study examining the indicators for the development of medical tourism in Yazd city. Their findings highlighted that senior managers and relevant authorities should prioritize urban infrastructure, marketing, and advertising metrics. They concluded that enhancing demand for medical tourism could be achieved through the

implementation of effective advertising strategies and the development of suitable urban infrastructure and services (27). Additionally, Cham et al explored the impact of marketing and social media, hospital branding, and the behavioral intentions of medical tourists in China. Their research revealed that social media advertising and communication positively influenced medical tourists' perceptions of hospital brand image, thereby enhancing their trust. Furthermore, the study found that the perceived value and trust of medical tourists towards healthcare staff acted as mediators between perceived service quality and overall satisfaction (28).

In the economic realm, several factors have been identified as significant challenges to the development of medical tourism. These challenges include political sanctions, international pressures, perception of insecurity regarding Iran, the global image of the country, and the interconnectedness of global, regional, and domestic economies.

Heung et al highlighted that in Hong Kong, key obstacles to the growth of medical tourism include policies and regulations, lack of government support, cost issues, capacity constraints, and the health and treatment needs of the local community. To address these challenges, they proposed strategies such as adopting new policies, enhancing advertising efforts, encouraging government action to stimulate investment in the medical tourism sector, and fostering cooperation between the hospitality industry and medical institutions to develop comprehensive medical tourism products (29). Sultana et al concluded that for a country like India to become an attractive and competitive medical tourism destination in the context of globalization, it is crucial to manage costs effectively and ensure high-quality services (30). This finding aligns with the emphasis of the current study on the importance of economic factors in medical tourism. Economic factors are indeed pivotal for the advancement of medical tourism. Lower treatment costs, investments in infrastructure, and positive economic impacts can significantly enhance the growth and sustainability of this industry. Additionally, the research conducted by Shafii et al underscored the significance of administrative and financial services. As medical service costs escalate, tourists face increased financial risks, which can ultimately lead to a decline in the rate of return visits to medical centers (31).

5. Conclusion

Although medical tourism in Iran has many capabilities, it must meet several requirements in this field. Factors such as improving the quality of services, proper coordination between organizations in charge of health tourism, creating a comprehensive system for collecting information related to the arrival of health tourists in Iran, and increasing the efficiency of the information system regarding Iran's medical tourism capabilities should be taken into account. It can be concluded that Iran's health tourism industry does not have a favorable position. By identifying its strengths and areas for improvement, Iran can enhance its role in the medical tourism market. Investing in its unique capabilities and effectively promoting them can distinguish Iran as a leading destination for healthcare services. To address areas needing correction, comprehensive planning, targeted marketing, and process optimization can significantly contribute to achieving desired outcomes.

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References

1. Rahimipour A. Statistical analysis of the world tourism industry, future markets and the position of Iran. *J Tour.* 2012;1(1):1-18. [Persian].
2. Smith M, MacLeod N, Robertson MH. *Key Concepts in Tourist Studies.* SAGE Publications; 2010.
3. Hall CM. *Medical Tourism: The Ethics, Regulation, and Marketing of Health Mobility.* Routledge; 2013.
4. Laws E. Health tourism. In: *Health and the International Tourist* (Routledge Revivals). Routledge; 2015. p. 199.
5. Lee J, Kim HB. Success factors of health tourism: cases of Asian tourism cities. *Int J Tour Cities.* 2015;1(3):216-33. doi: 10.1108/ijtc-08-2014-0014.
6. Yap J, Chen SS, Nones N. *Medical Tourism: The Asian Chapter.* Singapore: Deloitte Consulting SEA; 2008.
7. Ramírez de Arellano AB. Medical tourism in the Caribbean. *Signs (Chic).* 2011;36(2):289-96. doi: 10.1086/655908.
8. Islam N. Chinese Medicine as a product filling the wellness health tourism niche in China: prospect and challenges. *Int J Tour Sci.* 2014;14(1):51-69. doi: 10.1080/15980634.2014.11434684.
9. Dehghani MR, Baghian N, Dehghani MH. Identifying and prioritizing of factors influencing the entry of medical centers on the medical tourism market in Iran. *EBHPME.* 2021; 5(2):78-89. doi: 10.18502/jebhpme.v5i2.6553.
10. Bookman MZ, Bookman KR. *Medical Tourism in Developing Countries.* New York: Palgrave Macmillan; 2007.
11. Taheri Damane M, Naderi Khorshidi A. Forecasting of human resources in the Islamic Republic of Iran using integrated scenario and cross-impact analysis. *Naja Human Resource Quarterly.* 2014;9(26):29-49.

12. Harahsheh SS. Curative tourism in Jordan and its potential development. United Kingdom: Bournemouth University; 2002. p. 45-78.
13. Tarighat Monfared M, Akhavan Behbahani A, Hassanzadeh A. Principles and Basis of the National Health Policy (A Comparative Study). Tehran: The Office of Social Studies Majlis Research Centre (MRC) Publication; 2008.
14. Izadi M, Ayoobian A, Nasiri T, Joneidi N, Fazel M, Hosseinpourfard MJ. Situation of health tourism in Iran opportunity or threat. *J Mil Med.* 2012;14(2):69-75.
15. Ayoubian A, Tourani S, Hashemi Dehaghi Z. Medical tourism attraction of Tehran hospitals. *Int J Travel Med Glob Health.* 2013;1(2):95-8.
16. Tourani S, Tabibi SJ, Tofighi S, Shaarbafchi Zadeh N. Medical tourism in Iran: analysis of opportunities and challenges with MADM approach. *Res J Biol Sci.* 2010;5(3):251-57. doi: 10.3923/rjbsci.2010.251.257.
17. Shaarbafchi Zadeh N, Tourani S, Abolhassani N, Bastani P, Aazami S. Medical tourism industry; challenges and opportunities. *Jökull Journal.* 2013;63(10):119-33.
18. Tourani S, Tabibi SJ, Tofighi S, Shaarbafchi Zadeh N. International trade in health services in the selected countries of ASEAN region; challenges and opportunities. *Health Information Management.* 2011;8(4):453-68.
19. Jabbari A. Designing a Model for Iran Medical Tourism. Tehran: Iran University Medical Sciences; 2009.
20. Delgoshaie B, Jabbari A, Farzin MR, Shaarbafchi Zadeh N, Tabibi SJ. Medical tourism in Iran: a case study. *Payesh.* 2012;11(2):171-9.
21. Zarei A, Feiz D, Maleki Minbashrazgah M, Maleki F. Factors influencing selection of medical tourism destinations: a special niche market. *Int J Healthc Manag.* 2020;13(Suppl 1):192-8. doi: 10.1080/20479700.2018.1492764.
22. Ratnasari RT, Gunawan S, Pitchay AA, Mohd Salleh MC. Sustainable medical tourism: Investigating health-care travel in Indonesia and Malaysia. *Int J Healthc Manag.* 2022;15(3):220-9. doi: 10.1080/20479700.2020.1870365.
23. Çapar H, Aslan Ö. Factors affecting destination choice in medical tourism. *Int J Travel Med Glob Health.* 2020;8(2):80-8. doi: 10.34172/ijtmgh.2020.13.
24. Dang HS, Nguyen TM, Wang CN, Day JD, Dang TM. Grey system theory in the study of medical tourism industry and its economic impact. *Int J Environ Res Public Health.* 2020;17(3):961. doi: 10.3390/ijerph17030961.
25. Amin NS, Ramli N, Zawawi M. Harmonising international legal frameworks and shariah principles in the context of medical tourism: an analysis. *IUM Law J.* 2023;31(2):65-96.
26. Sarabi Asiabar A, Rezapour A, Raei B, Tahernezhad A, Alipour V, Behzadifar M, et al. Economic, cultural, and political requirements for medical tourism development in Iran: insights from a fuzzy analytical hierarchy process method. *Med J Islam Repub Iran.* 2021;35:199. doi: 10.47176/mjiri.35.199.
27. Shafii M, Madadzadeh F, Askari R, Zarezadeh M, Mohamad Abdoli A, Bahariniya S. Investigating medical tourism development indicators in Yazd Reproductive Sciences Institute: a cross-sectional study. *Int J Reprod Biomed.* 2022;20(12):1039-46. doi: 10.18502/ijrm.v20i12.12565.
28. Cham TH, Lim YM, Sigala M. Marketing and social influences, hospital branding, and medical tourists' behavioural intention: before-and after-service consumption perspective. *Int J Tour Res.* 2022;24(1):140-57. doi: 10.1002/jtr.2489.
29. Heung VC, Kucukusta D, Song H. Medical tourism development in Hong Kong: an assessment of the barriers. *Tour Manag.* 2011;32(5):995-1005. doi: 10.1016/j.tourman.2010.08.012.
30. Sultana S, Haque A, Momen A, Yasmin F. Factors affecting the attractiveness of medical tourism destination: an empirical study on India- review article. *Iran J Public Health.* 2014;43(7):867-76.
31. Shafii M, Askari R, Madadzadeh F, Zarezadeh M, Abdoli AM, Bahariniya S. Development and validation of medical tourists attracting factors scale (MTAF-46). *Int J Healthc Manag.* 2024;17(1):119-30. doi: 10.1080/20479700.2022.2157932.