# Letter from Mexico

## Mexico's health care system

Mel Borins, MD

hen you think of Mexico, do images of turista and Montezuma's revenge make your intestines groan? Perhaps you have had many patients who got sick in Mexico, and you fear going there because you might get hepatitis or a parasite. Mexico, however, is actually quite advanced and not the backward, primitive place you might remember from the movies.

#### Medical care coverage

In this country of 90 million people, there is a huge gap between rich and poor, and the health care system reflects this contrast. There are four basic strata of delivery systems. For everyone who works, there is the IMMS. Both employer and employee pay into an insurance system very much like a health maintenance organization. There are clinics, hospitals, and doctors specifically set aside to provide care for everyone who is employed in the private sector.

If you work for the government, there is ISSSTE, a completely separate health care delivery system for government workers. If you are poor and unemployed, you can go to SSA hospitals and clinics set aside for public care. You are required to pay according to your financial capability. There are also hospitals for workers in the oil, telephone, and electrical industries.

Most importantly, especially for tourists, there is the private medical system. If you are not a government employee and do not work for a company but are self-employed, you would most likely have private health insurance. Also, certain executives in the oil, telephone, and electrical industries and in the government have special benefits to access the private medical system.

#### **Hospitals**

Dr Leon Golub, a geriatrician, works in a multidisciplinary medical centre in Cuernavaca, a large city south of Mexico City. In the clean, fully equipped small office building close to the hospital, many specialists work together in the private system to provide comprehensive care.

Dr Golub took me to the privately run Sanitorio Henri Dumant, a small 20-bed hospital close to his office. A private room was \$90 per night, and a semiprivate room was about \$59 per night (all rates in US dollars). This cost included only the room. Drugs, tests, and doctor's fees were extra. This private facility provided more personal care than the huge public facility.

I also went to the Hospital Angeles in Mexico City. It was one of a big chain of hospitals all over Mexico providing luxury care to the rich. This 200bed hospital was like a five-star hotel. The modern, fully equipped emergency department even had its own endoscopy and operating rooms. The stateof-the-art intensive care unit, the lithotripsy room, hyperbaric oxygen centre, and helicopter landing area were quite impressive. The hospital also had an eight-bed day surgery unit and a newborn nursery with 20 incubators; magnetic resonance imaging was available for \$600.

The average cost of a room was \$50 per day; however, if you were very wealthy you could stay in one of seven suites. The most elaborate room (\$500 per day) had a living room, dining room, two washrooms, and an office for business executive patients who might need to work. The walls were covered with wallpaper and attractive art, and the floors were tiled in marble. All rooms were equipped with televisions and VCRs, safes for valuables, and sofa beds where relatives could sleep.

#### Letter from

In the public hospitals, it is quite a different story. Dr Lindsey Horenblas is a Canada-trained doctor who works in San Miguel, a town of 140 000. He relates:

In the public hospital where I work, the fees to patients are prorated to their income so paying the hospital and the doctor is not the big issue. It is the supplies and drugs that are in short supply because the hospital can't afford to stock them. For instance, if you have a broken femur, your family has to raise the money to buy the hardware, then they have to buy it, and when they bring it back to the hospital, then [physicians] will operate on you.



**Dr Leon Golub**, a geriatrician, works in Cuernavaca at Sanitorio Henri Dumant.

#### **Medical schools**

Mexico has both private and public medical schools. The main difference between the two is the class size and facilities. A private medical school might have 40 to 100 students in a class, whereas a public one might have 200 or more. Each doctor must go through 2 years of basic science and theory, 2 years of clinical work, a 1-year internship, and then provide 1 year of social service in a poor or underserviced area chosen by the government.

During this period of service, the government pays for doctors' room and board. After this year of service, doctors can go into practice or go into specialist training. After specialists graduate, they have to spend 3 to 4 months in social service before going into practice. Specialists and general practitioners have a moral imperative to be recertified every 5 years.



New hospital opening in Colima.

#### **Traditional healing**

Native people or people in rural areas and villages still go to local shamans or folk healers. Most shamans combine spiritual beliefs with herbs and massage.

Wendy Lyons, a Canadian who has been visiting Mexico for many years, has been meeting with local folk healers and learning about their traditions and beliefs. She was most impressed by the humility, sincerity, and kindness of the folk healers. She believes most Mexicans are still quite spiritual in their daily lives and still believe in miracles.

### Boil it, peel it, or forget it

The hotels that cater to tourists visiting Mexico appear to be completely hygienic. So people let their guard down and forget the "boil it, peel it, or forget it" rule that tropical disease specialists preach.

It is imperative that you buy complete insurance coverage when traveling to Mexico. Many hospitals accept direct payment from insurance companies, but most independent doctors do not. They will, however, provide receipts so tourists can be reimbursed when they get home. Make sure your policy has evacuation coverage that enables you to be flown home if you get too sick to be managed in Mexico.

Just remember: a milligram of prevention is worth a kilogram of cure.

**Competing interest: Dr Borins** was sponsored by the Mexican Tourist Board to travel to Mexico in February 2001.

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