



Medicine without borders: a literature review of short-term international medical missions

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Abstract

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Background Each year, medical providers and trainees travel to low-income and middle-income countries to deliver direct medical care via short-term medical missions (STMMs) lasting between 1 day and 2 years. In spite of the high prevalence of STMMs, little aggregate information exists about where STMMs go, the services they deliver, and their relationship to the recipient country's health-care system. Our objective was to review the literature on STMMs to better understand their characteristics and identify how they link to the in-country health system.

Methods We searched MEDLINE-indexed articles on STMMs published between January, 2010, and August, 2014. Exclusion criteria included publications with exclusive focus on medical school curricula, commentaries, and publications on military or disaster medicine. Of 1538 identified articles, 152 met our criteria. Data extracted from the full text of the eligible articles included article type, subject, and STMM details such as location and duration.

Findings Nearly half of all articles (72 [47%]) described one or more specific STMMs without any evaluation of the STMM's work; 48 (32%) broadly discussed the concept of STMMs (eg, ethics, best practices); and 32 (21%) evaluated some aspect of an STMM, such as cost-effectiveness or post-operative complication rates. Most articles focused on the implementation of STMMs (66 [43%]), personal experiences of STMMs (36 [24%]), or ethical issues (23 [15%]). Data from 102 articles that detailed an STMM reveal that most medical teams came from the USA, and most STMMs went to Latin America (42 [42%]) or sub-Saharan Africa (34 [34%]). About 40% of articles (41) explicitly state that students were involved in the STMM. About a third (36 [35%]) of these articles did not specify how long the STMM lasted, and approximately half (53 [52%]) did not specify how many people were involved in the STMM. Most publications also lacked essential details about STMMs' link to the destination countries' existing health systems. There was little description of the local health needs or how the STMM would affect local health-care delivery, either favourably or unfavourably.

Interpretation Published articles suggest that the prevalence of international STMMs is on the rise. However, very few publications include rigorous evaluation of the services rendered or describe how STMMs link to the recipient country's health-care system.

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Declaration of interests
We declare no competing interests.