Chapter VI Summary and Conclusion

6.1 Summary

The aim of the chapter is to provide conclusions leading to recommendations of the potentials for better marketing in public hospitals.

Marketing and all activities sometime connected with it such as advertising were once regarded as offensive and loathsome in a hospital set-up. While marketing was initially introduced in hospitals service, the spontaneous reaction of most people from both inside and outside the hospital was some of focus and disbelief that experts even think of using marketing techniques including in advertising in hospitals. However things have changed, in recent years and a belief has changed. Hospital marketing now slowly coming of ages in many countries furthermore, still conveys a shame according to numerous doctor's facilities in India.

In the words of Robert Shafner, marketing in hospitals is not selling, hospital marketing is basically keen-sighted what the public observes as its needs, and the hospital identify those necessities and develop the services, which is capable of delivering these service to satisfying those needs.

In other words, when a hospital goes on board with a marketing program, it seeks to find the needs of present and potential patients and tries to fulfill those necessities by evolving appropriate services. Hospital then focus to provide information about these developed services and endorses them to appeal to patients.

Maximum of the organisations come across a variety of marketing difficulties. few of them have risen recently due to employer groups and third parties, decreased funding and changing reimbursement policies, the regulatory policies which affect the hospitals ability to provide service, emerging trends and changing market place features.
Fortunately, hospitals are now starting to apply marketing to a wider set of problems. Likewise, what strategy should the hospital adopt to attract certain categories of patients? How can the hospital appeal to more consumers as a patients to preventive care services, such as yearly medical checkups and various screening tests? What marketing programs can build goodwill or more contributions?

**Study objectives**

The subject in broad is to study the marketing mix and how this marketing mix tool is useful in the present market and competitive situation and to analyses the hospitals which run under government regulatory body. The general objective for which the research has been commenced is to study into the marketing process i.e. 5p's of services marketing in selected public hospital.

**Scope of the Study**

The scope of the present study spreads to analyze how far the marketing mix i.e. 5p's of services marketing; product/service, price, place, promotion and people are carried out effectively in J. J. hospital.

The notion is that the hospital runs thorough marketing philosophies, which will function as a top performer and patient satisfaction will be high. For this purpose it is proposed to study the perceptions from the doctors, nursing staff and administrative staff.

In the next step of research, an attempt has been made to study the opinions from patients. Patient experiences about medical care are increasingly essential because the success of a hospital is to be determined
on bases of the satisfaction of the users.

**Methodology**

The current study is an effort to probe into Public health care in Mumbai and study the J. J. hospital; hence the scope is limited to public hospitals only.

**Selection of Sample Hospitals**

The researcher has selected Public hospital in Mumbai city. Hospital name is J. J. Hospital. It runs on present day logical and innovative lines, under the control of government.

**Collection of Data**

The information has been gathered from both sources i.e. essential and optional. For accumulation of information from essential sources, endeavors were made to think about the assessments of all work forces in the associations through questionnaires. With reference to this researcher has proposed to distribute two types of questionnaires.

The first type was distributed to the doctors, nursing staff and administrative personnel and the second type of questionnaire was distributed to the patients.

Beside primary data, wherever necessary the information has also been collected from the reports of central and state governments. The researcher visited and collected information from the various institutions whenever needed.

**Statistical Methodology**

At this time an attempt has been made to study selected hospital, with
reference to marketing of their services. In order to do analysis of factors, average count responses for various points Likert scale were taken as basis. Analysis of variance, correlation and regression analysis is used to know the same.

**Selection of Sample Size doctors / Nurses / Administrative personal**

The questionnaires for doctors / Nurses / Administrative personal, 60 samples were selected as samples for final analysis by using judgmental sampling method and questionnaire was distributed.

**Selection of Sample for Patient Satisfaction Survey**

In order to find out an answer to the question an attempt has been made to collect information from customers (patients) of the hospital services.

In this study the word patients refers to only the inpatients and their responses only have been consider in sample hospital. It is in opinion that the in-patients spend more time in the hospitals than the out-patients and they have a lot of coverage of experience and access to the hospital environment and treatment.

Further, in this research, importance is given to the responses of the inpatient patients. Moreover, the hospital that has been selected for study is known for their services in general medicine related problems. Questionnaire was prepared for patients and the test respondents were drawn through arbitrary examining. The polls were circulated to 650 patients in J. J. Hospital and 500 respondents were chosen for definite investigation.

**Major Findings of the Study**

The respondents selected for the survey came from different age groups with a large chunk, about 35.60% coming from 31 to 45 years age category,
remaining major chunk goes with 60 years above age group i.e. 30.20% and
the others distributed in all age groups.

Further, more than two third i.e. 2/3 of the participants in the survey were
male patients and the remaining were female. As the age group was varying
for the respondents, so was their occupation. Among all the participants in the
survey some were self-employed, some were in employed, few of them in
housework, there were even not working and students too.

The respondents were suitably qualified with almost 50% of the respondents
being either graduate or postgraduate. In addition the survey also pointed out
that a large number of people visiting J. J. hospital was mainly from middle or
upper middle class with their annual incomes in the range.

Another result as pointed out in the research was that majority of the
participants preferred to visit the hospital which was known to them. This
implies that patients prefer recommended hospital and the repeat customers
form a major chunk for the hospitals i.e. 53.2 % patients were from repeat
purchase category.

Finding observed that older patients, males, those with a lower level of
education, those who observed low income are more satisfied with their
healthcare plan than their counterparts.

When study according to educational status, the individuals who have higher
expectations as compare to other groups. It is observed that it is more
challenging to satisfy young patients, may be because these young
individuals have higher expectations than do other groups.

Individual components, for example, marital status and education likewise
decide hospital exchanging behaviour. People with advanced education are
more health cognizant and more mindful of their buyer rights, they are more
worry about their health status and result of their spending, they are more disposed to test therapeutic counsel and make inquiries.

Income was the one of the socio-economic trademark saw to have a noteworthy impact on patient fulfillment; this study included socio-economic qualities, for example, age, sexual orientation, occupation, marital status, work status, education and wage i.e. income.

It watched that income likewise affected patient fulfillment; upper pay patients bunches appeared to be more worried with individual health conveyance for instance answers they get to restorative inquiries, sitting tight time for different administrations and medicinal care. Bring down income gathering of patients as a buyers, then again, are more worried about expenses and general physical offices, which shows esteem introduction conduct.

The time engaged by the hospital while discharging a patient states how organized and prompt hospital service is. It is also a very essential factor which determines the satisfaction of patients.

Waiting time is another serious factor which influences the perception of a hospital for the patient. However for J. J. Hospital the waiting time is high while availing certain type of services.

As the patients are already suffering from some ailment, it is always better that the staff be courteous and helpful. Further they should also be well trained for handling the patients. In case of J. J. Hospital, the patients agreed that the staff was well trained, courteous and helpful. In addition the kind and compassionate nature of nurses and empathetic attitude of doctors helps in reducing the suffering of patients.

Also the respondents from J. J. Hospital also agreed that the nurses were compassionate and helpful and the doctors understood.
The healthcare center has a group of all-around prepared and exceedingly experienced experts, specialists in different claims to fame giving the most elevated measures of restorative and patient care with an emphasis on administration excellence.

The hospital uses the state-of-art-technology to provide excellence in delivery of its services.

**Managerial Implications**

- The findings of this study will be helpful to academicians and scholars for better understanding of market orientation and service relationship in health care.

- Practitioners/ Managers will be benefited to orient themselves to the best standards and will be capable of improving their service from their present level.

- Market orientation and patient satisfaction in health care has become a center of attention in recent years.

- The reason for this study is to decide the elements which affect patient’s satisfaction among hospitalized patients from hospital marketing perspective, which has positive impact on marketing and hospital success.

**6.2 Conclusion**

In recent era, the hospital management has gained reputation the world over. The management of a hospital is observed significant to deliver services to the society. For a successful marketing of services, it is necessary that the concerned organization is professionally well equipped. This supports the hospital in many ways, such as an increase in the potentials to show quality, a
strong base for serving the poorer sections of society and a favorable nexus for making it an on-going process.

The first and primary task before a marketer is to satisfy the users by making available to them the excel services. We cannot deny the circumstance that in the healthcare services in addition to the medical aid; various other factors also play an important role. If the doctors and nurses are found sympathetic, soft, and decent to the patients, the time-period for curing a patient is reduced fantastically.

By marketing medical services which mean making available the healthcare services to the users in such a way that they get excellent services at the reasonable fee structure and as per expected standard. The marketing philosophies focus on making accessible the services even to those categories of the society who are not in a position to pay for the services which they want to avail.

Service provider performance makes customer return to the same provider as a happy customer and spread more favourable “word of mouth” that is recommendation, Youssef (1996). Hospital is a high support benefit as it centers the individual’s wellbeing and prosperity. Social insurance specialist organizations ought to oversee fabulousness through continually upgrading procedure and comprehension the elements that are exceptionally connected with patient satisfaction.

Zineldine (2006) bring to the notice that the patient satisfaction is a cumulative construct which embrace satisfaction with various hospital factors.

This study restate that patient satisfaction is collective construct incorporating the satisfaction with different hospital service components such as registration desk, food and canteen services, housekeeping services, discharge process, medical/clinical services, facilities provided by hospital,
and nursing services and arrange in a line with the study conducted by Zineldine (2006).

The healthcare management should think through these dimensions for the overall patient satisfaction and outdo the firms that do not provide patient satisfaction.

In our study, education was a influential factor in level of satisfaction (the highest satisfaction total was for individuals who were illiterate and the lowest for individuals with a graduate degree) but there was no trend in the odds ratio.

Current study surveyed various factors which are remarkably important and least essential for the individuals in choosing hospitals services for their treatment.

This present study reveals that staff care is the greatest compelling component to patients in rating their entire doctor's facility encounter as "phenomenal," with nursing care comes in the second most noteworthy variable. These two elements are particularly more grounded drivers of general fulfillment than different elements. For human services associations to maintain in the focused medicinal services advertise rivalry, social insurance specialist organization must have steadfast clients who can get to be rehash clients and prescribe the healing facility to others.

As supporters, these clients enhance the odds of the doctor's facility survival in rivalry. Social insurance specialist co-op needs to buckle down toward winning patient rating as an "amazing" on their general hospital encounter.

As this study appears, nursing consideration and staff care are basic to help patients' general healing facility encounter. Luckily, these two elements are under the control of medicinal services directors.
Fulfilling patients is the main stage to ensure an unwavering shopper base. In an inexorably aggressive medicinal services industry, just those healing facilities may benefit the individuals who reliably convey persistent fulfillment and they will succeed.

Marketing mix procedure is a fundamental system in administration industry to guarantee associations' prosperity. It is imperative to advertising the doctor's facilities in the objective market gatherings and follows up in the interest of the entire doctor's facility and do coordination while managing healing center execution which is measured by patient fulfillment. These are the variables through which the clinic attempting to win by applying advertising technique and giving administrations as a result. This exploration discusses that such procedure does not grow basically by shot, but rather through an arranged exertion by the hospital.

The relationship between above examined elements and the marketing blend technique components depended on discoveries from the writing, pilot interviews. The system recommends that marketing mix technique as a center theory in this examination, which gets its indispensable part through the result of promoting blend procedure on hospital execution result which is measured by patient fulfillment.

At present, we can say that hospitals identify their position in competitive market environments and are equipped to react to the situation by relating marketing tools normally used in the product market.

6.3 Recommendations

The following are some of the recommendations that have emanated from the analysis, discussions and conclusions of this study.
Importance should be given to maintain cleanliness in the hospital particularly in the toilets. Sufficient amount of drinking water should be made accessible at any time all over the year.

There should be a Hospital administration department attached with Medical Officer Office of the hospital as available in many of the medical colleges with regular staff for uninterrupted supervision of patient satisfaction and methods to improve hospital services.

This department will support in producing future hospital management experts among doctors and also increase understanding of management principles among undergraduate medical students. This work can initially be started in collaboration with Department of Medicine which will be involved in teaching these skills to students.

6.3.1 General Recommendations:

Staff Behavior:

Healthcare is a high support benefit as it concerns the individual's wellbeing and prosperity. Healthcare specialist co-ops ought to accomplish quality through always updating practices and comprehension the variables that are amazingly connected with patient fulfillment. Staff conduct has the real impact on patient's fulfillment in healing facilities. Since, in-patients were specifically in contact and connected with the healing center staff, they give a treatment as well as consideration and concerned.

Medicine Availability:

Patients in are enduring because of non-accessibility of crisis medications/lifesaving drugs. The crisis drugs/lifesaving medications are characterized as medications which include prompt organization inside
moment's pre or post or amid a therapeutic crisis. These solutions have the imminent to maintain life or potentially anticipate facilitate entanglements and are prescribed for both out-patients and in-patients. The non-accessibility of these prescriptions in government clinics has lead significant issues pushing patients to purchase these solutions from outside. At last which drive patients disappointment.

More Attention to Patients:

Endeavors ought to be made to diminish the patients stack at the upper level offices that specialists and other staff can give more care to the patients.

Hospital Infrastructure:

The endeavors additionally fancied to bolster framework and HR at lower level healthcare facilities.

Food Arrangements needed to be Strengthen:

The dietary units remain as the second key unit of a doctor's facility from the perspective of consumption. People are worried about the nourishment and experience about the same.

Interpersonal Skills of the Medical Personnel:

The significance of patients’ feedback in hospital management. The outcomes demonstrate regions for development containing evacuation of poor interpersonal connections between specialist organizations and patients. These abilities are enhanced among the medicinal work force.
Wanless (2005) depicted that Healthcare Marketing is not the same as enjoyed Marketing in different Industries. He said "In Healthcare advertising message must include a component of goodwill, mission, and group benefit … in different Industries, it sounds somewhat mannered". Consequently, it is fundamental for Marketing and Public Relations exercises in the Government Hospitals to talk the subject of group administration, this ought to likewise be a piece of its central goal and vision. Government Hospital ought to likewise ensure that it offers quality support of the Patient.

In a comparable word, Repert and Babacus (1996) penned that "In a period of worldwide front where expanding rivalry and forthcoming extra government control, a solid administration introduction can serve as a methods by which a healing facility set apart itself from its rivals". The accompanying proposals are in this way recommended:

• Government Hospital ought to contracted viable Health Care Marketers that would acquire expected pivot the framework.

• Hospital ought to lessen their cost on overhead to have extra cash for Marketing most only publicizing, staffing, hardware and research.

• Employee assurance ought to likewise be upgraded with a specific end goal to get enhanced outcome from them i.e. best administration conveyance.

• Hospital ought to accentuation on key open doors in their market surroundings. They ought to screen the market environment for any likely dangers and change such dangers to circumstances and wherever it is unrealistic to do as such then exploit the dangers.

• The decision of area for Government Hospital ought to be adjacent and open. This will absolutely help as leeway for Hospital over its rivals.
• Revenue base of Government Hospital ought to be enhanced through showcasing new technique i.e. purpose of separation.

This will surely make them have advantage over their rivals. This concentrate thus infers that Marketing and Public Relations however appear as rising marvel in Healthcare; this is one of the essential elements of administrations. Health Care associations ought to subsequently coordinate their exertion concerning utilizing it for the comprehension of their objectives.

**Consumer Research**

Hospitals should regularly conduct the customer research; which is the utmost powerful instrument which can be used for fruitful marketing of services in hospital. Prior to product or service is planned and introduces, a cautious research has to be piloted to identify the needs of the individuals. Organisation does not just sell something, rather than they sell something to individuals. Therefore, service planning in the hospital should initiate with market research identifying correct market segments (i.e. groups of individuals with some shared needs) and then continuing with a list of services planned to satisfy these necessities. This should not implement in hospitals unsystematically. It is a continuous process; data should be analyzed and also translated into action.

**Concept of Customers in Hospital is altered from other service industry**

Hospital should recognize, there is a big dissimilarity in waiting on a consumer in a hospital and in any other type of service organization. In the hospital the customer is a sick individual. In unfamiliar environments, many of them are chaotic, tense, confused, frightened and nervous. Some are unwell, some in wheelchairs. At this time a friendly, helpful and caring individual attitude, a sympathetic word of greeting will not only be cheering to patients, it will greatly improve the public relations value of the hospital. The patient will instantly place his/her trust in the helpful hands of hospital staff.
and undoubtedly feel that there is no need to be frightened. If he/she receives this warmth and welcome feeling all the way, the patient i.e. our customer will become the hospital's marketing tool and public relation agent in the public by his word of mouth as a recommendations.

It can be determined from the above replies and analysis that Availability, Affordability and Accessibility should be the three pillars of any health policy.

(1) **Availability**: Healthcare facilities should be sufficiently made available to people qualitatively as well as quantitatively.

(2) **Accessibility**: Healthcare facilities should be accessible to individuals in their neighborhood, round the- clock as and when they required.

(3) **Affordability**: Healthcare services must similarly be affordable for all without any discrimination.

The public hospital should enter into tie up with private pathologies and test centers to perform routine to all types of high cost tests. The private sector organisation should provide these tests to government clinics and hospitals at concessional amounts / rates as per assured pre-determined agreement. The public hospital may charge negligible charges for these tests to above BPL families and provide these tests free of costs to Below to Poverty Line (BPL) families.

**Marketing strategy for J. J. Hospital**

**Diversification Strategy**: There are comparative merits of diversification strategy inside the hospital industry. Diversification in a hospital comprises ambulatory surgery, home healthcare, outpatient diagnostic service clinics, so that they are able to achieve this with lower costs.

**Differentiation Strategy**: This is the strategy of differentiating the provided
service which is supplied by the hospitals. It should be exclusive. Methodologies to differentiation can take comes under many forms, such as features, technology, patient service and networking. This will increases the loyal patients and outcomes boost in quantity of patients. With this the establishments can decrease the costs.

**Market Share Strategy:** It has been recommended by many to be a strategy for success in hospital industry. Bigger market share is believed to provide greater pricing freedom and improved opportunities for economies of scale.

**Cost Leadership Strategy:** The benefit of lower costs which were enjoyed by the business industries now can be endorsed to healthcare settings. This involve aggressive construction of well-organized scale facilities, spirited pursuit of cost reductions from previous experience, overhead control and tight costs, cost minimization in all the service areas. As cost reduction is a acute factor in refining return on investment, the administrators have to focus in this area. J. J. hospital is already in Cost Leadership strategy advantage.

6.3.2 Further special recommendation for J. J. Hospital

**Mobile Health Vans:** Mobile health vans, equipped with the elementary diagnosis facilities and a nurse and a doctor, can go a long distance in decreasing the difficulty of poor people. The idea of doctor-on-call can surely help people to access public healthcare facilities as and when compulsory. Each secondary healthcare center should keep at least one mobile healthcare van while tertiary healthcare center should keep at least two mobile health vans. There should be a centralised arrangement for receiving patients calls and informing the healthcare van in the neighborhood to attend to a patient.

**Point of Care Testing Facilities (POCT):** Purpose of-care testing (POCT) is very much characterized as restorative or diagnostics testing at or close to the
site of patient care. The principle reason for POCT is to play out the test helpfully and immediately for the patient. There are a number of POCT tools which are transportable, portable, and handheld devices. These tools give immediate results, are convenient and cost effective and do not require much care. POCT instruments are available for some of the basic tests such as blood gas and electrolytes analysis, blood glucose testing, rapid cardiac markers diagnostics, drugs of abuse screening, rapid coagulation testing, and so on. Use of such diagnostics devices can reduce expenses amount on testing and evaluation facilities and can also help in fast diagnosis of diseases.

**Health Care Services Making Affordable for All:**

The Affordability of healthcare services is major concern not only in the city of Mumbai but in furthermost of the other metropolitan cities also. The researcher has made the following recommendations for making healthcare services reasonably priced for maximum population in the urban cities like Mumbai:

1. **Tax Incentives and Health Cess for Contributions and to Public Health:** The Government should consider imposing heavy Health Cess in the budget in direction to meet public expenditure on health sector. The Government should also offer tax rebate and tax incentives to persons and corporate who make investments and make certain contributions to the public health sector. This will give lift to investment in public healthcare sector.

2. **Affordability during Major Illness:** Medical expense for the period of major illness is a most important factor that pushes several families into liability tarp and poverty. The expenses of hospitalization and subsequent follow-up are vast. Middle class segment and lower middle class segment families cannot have enough money to get in-patient health services of private hospitals and hence, maximum of them depend on public hospitals for treatment. On the other hand, some
private hospitals and clinics have leftover capacity. This dichotomy in healthcare service industry in the city of Mumbai can be resolved through effective public-private sector hospital partnership. There are number of other means of providing in-patient services to the needy population. Few of them are information helpline, health insurance, tie-up with charitable hospitals and institutions, etc.

3. **Gap Filling Information through Medical Helpline:** A number of facilities such as vacant patient’s quota in private hospitals, free health checkups facilities in charitable hospitals, subsidized medical aid given by charitable institutions, etc. are not well-known to poor population due to lack of knowledge and information. This information gap should be cover up by creating a centralized government 24 X 7 helpline facility like toll free numbers for providing information like, facilities in different government hospitals, availability of beds in hospitals, details of charitable hospitals and their services, availability of quota for BPL families in private hospitals and medical aid provided by various NGO, private trusts and foundations, along with religious trust and corporates sectors. Also, information about NGO / trust / foundations those are voluntarily ready to assist the patient’s family to raise the fund.

**Development of Relationship Marketing**

- Relationship marketing is the strategy for getting nearer to the buyer by building up quite a while relationship through wary thoughtfulness regarding shopper needs and administration conveyance. A emphasis on consumer retention;
- An relationship marketing focus will be towards item benefits moderately than item includes; A long haul perspective of the affiliation;
- Maximum weight on shopper responsibility and contact and improvement of continuous relations;
- Numerous representative/shopper contacts;
➢ An weight on key record relationship administration and

➢ An accentuation on trust.

➢ All of the practices are useful in maintaining great relations with doctor's facility administrations clients.

**Direct – To - Consumer Marketing.**

Direct-to-consumer (DTC) marketing includes promotional techniques pointed at the end users, i.e. targeted to specific consumer segments, and tailored to the greatest degree of possibility. The DTC development is accomplishing brake in hospital as the business move toward progressively client driven and the ability to target fine populace sections is refined.

**Database Marketing**

Database marketing is a profound established component of promoting in for all intents and purposes each and every other industry; healthcare professionals have been sluggish to adopt this methodology. The catastrophe of healthcare to take benefit of data – oriented approaches has partial practitioner competitive potential. Today, however, scientific advances make it at ease than ever to take advantage of these methods.

**Internet Marketing**

The Internet Marketing has fundamentally transformed the universe of marketing and healthcare. Even though healthcare associations were easygoing to hedge on the Internet Marketing style, late years have fathomed a surge of enthusiasm for the act of the Internet for a broad scope of promoting exercises. Hospitals have to create / develop / maintain websites since this has become their chief interface with their consumer now days.
A many health systems are permitting email correspondence with doctors, and performing genuine sickness administration on the web.

Marketing through Public Relations

There are alternative marketing programs that uphold image and not involve advertising while still success in reach of large number of individuals. These programs are a combination of public relations and guest relations events implemented by well qualified, motivated and committed staff that offers courteous service, friendly to patients. In almost every unit of the hospital where staff comes in contact directly with the patients, the individual relations and patient relations are of extreme important. This is where marketing work and public relations at their best. Depending on how the staff practices public relations will make develop the hospital image. All additional external marketing activities are less important, even extra and irrelevant. Hospitals were unsuccessful to pay attention to this detail which is a key to their success.
6.4 Future Scope

1. Researcher has provided a detailed study on the marketing of hospitals. The study lays down path for future researches as there has been not much of prior study in the subject.

2. One of the areas which can be addressed in the future studies is that the research should be carried out in different parts of the country and world so that the study can be generalized across the whole world.

3. Furthermore the number of hospitals should be more as the study is constrained to just a single open public hospital. A greater number of hospitals would help in making the study more strong.

4. One more aspect which needs to be taken care of in the further researches is that the responses of the employee should be captured through interviews as it allows the respondent to provide a detailed and comprehensive reply to the questions. Further it allows them more freedom to talk about the subject of organisation image.

5. Gathering information on length of waiting time was beyond the scope of the study, as the survey tool was not designed for this. It is strongly recommended that waiting time be studied in future, both in terms of outpatients and inpatients as another separate study focusing mainly on duration and factors involved in waiting.
6.5 Limitations of Research work

Researcher had made all the best possible attempts for creating a comprehensive study. However certain limiting factors have restricted the study.

1. One of these factors is that the study is limited to only two hospitals and it is difficult to generalize the marketing strategies concept to the complete healthcare sector.

2. Further the study is carried out in only one hospital; the results derived from a study may not be exactly equal to the true value of the population.

3. Another limitation of this study is the size of the problem; the study is limited to marketing only.

4. As such the study cannot be generalized to even the country.

5. Moreover the responses of the medical staff have not been captured extensively in the study which means that the patient perspective has been the main focus.

6. Critical or very serious patients were excluded from the study on ethical grounds and as advised by treating physicians. This would have confounded some results of the present study.