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ЕВРОПЕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ**

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OECD Health Data: specialists outnumber GPs in most OECD countries

18/07/2007 - The medical profession is a growth industry: **OECD Health Data 2007** shows that the number of doctors in OECD countries has increased by 35% over the past fifteen years to 2.8 million. In most countries, this growth was driven largely by rising numbers of specialists – up nearly 50% between 1990 and 2005 - compared with the 20% increase in general practitioners (GPs).

Specialists now account for more than half of all physicians in most OECD countries, with the exceptions of Australia and Belgium, where GPs continue to outnumber specialists, and France, Portugal, New Zealand and Turkey, where their numbers are equal.

Income levels, a determining factor in the supply of doctors, vary a lot across OECD countries. Specialists generally earn substantially more than GPs, partially explaining the changing specialist/GP balance and the resulting concerns about GP shortages in several countries. Specialists' incomes are high relative to average national income in the Netherlands, Belgium and the United States, but quite low in Hungary and the Czech Republic. GPs have high incomes (also in comparison with average national income) in the United States, New Zealand and the United Kingdom, and relatively low incomes in Hungary and the Czech Republic.

Large variations in the number of doctors per capita in OECD countries

There are large variations across countries in the number of practising doctors per capita, ranging from highs of 4 or more per 1000 population in Greece and Belgium, to below 2 in Turkey, Korea and Mexico.

The ratio of practising doctors per 1000 population grew between 1990 and 2005 in nearly all OECD countries, but at a slower rate than in the previous fifteen year period. This is a result of cost-containment measures introduced by many countries during the 1980s and 1990s which reduced the number of new doctors by limiting medical school intakes (so-called "numerus clausus" policies).

From 1990 to 2005, the annual number of medical students graduating declined in France, Germany, Italy, Japan, Spain and Switzerland. If training efforts do not increase significantly in the near future, many countries will have to rely increasingly on foreign-trained doctors as the baby-boom generation of doctors retires from the profession.

The OECD's International Migration Outlook, already released on 25 June, examined the "brain drain" of doctors from lower-income to higher-income countries. Between 2000 and 2005, the share of foreign-trained doctors rose in many OECD countries. In 2005, the United Kingdom, Ireland, the United States, Australia, New Zealand and Canada had the highest share of foreign-trained doctors, with some one-quarter to one-third of all practising doctors trained in another country. And the share of foreign-trained doctors is growing rapidly in Switzerland, France and some of the Nordic countries.

Health spending continuing to grow faster than the economy as a whole

OECD Health Data 2007 also notes that a growing share of the economy is devoted to health across OECD countries. Per capita health spending increased by more than 80% in real terms between 1990 and 2005 on average in OECD countries, outpacing the 37% growth in GDP per capita. In 1970, health spending accounted for just 5% of GDP. By 1990, this share had increased to nearly 7%. Today, it has climbed to 9%. One in four OECD countries now spends more than 10% of its income on health. With a 15.3% share in 2005, the United States leads by a wide margin, followed by Switzerland (11.6%), France (11.1%) and Germany (10.7%).

As long as health spending continues to outpace economic growth, governments will either need to raise taxes or social security contributions, reduce spending in other areas or make people pay more out of their own pockets for health goods and services.

OECD Health Data 2007 is the most comprehensive source of comparable statistics on health and health systems across the 30 OECD countries. Covering the period 1960 to 2005, this interactive database can be used for comparative analyses on:

- Health status
- Health care resources
- Health care utilisation
- Expenditure on health
- Financing of health care
- Social protection (including public health coverage and private health insurance)
- Pharmaceutical markets
- Non-medical determinants of health (including smoking and obesity).

OECD Health Data 2007 is available online to subscribers of [SourceOECD](#), the OECD online library. It is also available on CD-ROM (in single-user or network installations). The database can be queried in English, French, German, Italian and Spanish. Japanese and Russian are available exclusively in the online version. For information, please contact sales@oecd.org or the OECD [Online Bookshop](#).

For more information, please go to www.oecd.org/health/healthdata

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Also available:

- [Eco-Santé OCDE : les médecins spécialistes sont plus nombreux que les généralistes dans la plupart des pays de l'OCDE](#) (French)