

## DOCTORS

Doctors play a central role in health systems. There are concerns in many OECD countries about current or future shortages of doctors, in particular of general practitioners and doctors practising in rural regions or deprived urban areas.

Projecting the future supply and demand of doctors is difficult because of high levels of uncertainties regarding their retirement patterns, migration patterns on the supply side, and changing health needs of ageing populations and health spending growth on the demand side.

### Definition

Practising physicians are defined as the number of doctors providing care for patients. Generalists include doctors assuming responsibility for the provision of continuing care to individuals and families, as well as other generalist/non-specialist practitioners. Specialists include

### Overview

Between 2000 and 2014, the number of physicians has grown in most OECD countries, both in absolute number and on a per capita basis. The growth rate was particularly rapid in countries which started with lower levels in 2000 (Turkey, Korea and Mexico), but also in countries which already had a large number such as Greece and Austria. In Greece, the number of doctors per capita increased strongly between 2000 and 2008, but has stabilised since then. The number of doctors has also increased strongly in Australia and the United Kingdom, driven mainly by a strong rise in the number of graduates from domestic medical education programmes. On the other hand, the number of physicians per capita remained fairly stable since 2000 in Estonia, France, Israel and the Slovak Republic.

In nearly all countries, the balance between generalist and specialist doctors has changed over the past few decades, with the number of specialists increasing much more rapidly. As a result, there were more than two specialists for every generalist in 2013, on average across OECD countries. In many countries, specialists earn more and have seen their earnings grow faster than generalists. This creates a financial incentive for doctors to specialise, although other factors such as working conditions and professional prestige also influence choices.

Nearly all OECD countries exercise some control over medical school intakes, often by limiting the number of training places, for example in the form of a *numerus clausus*. Ireland and Denmark had the highest number of medical graduates per 100 000 population in 2014. Graduation rates were the lowest in Israel, Japan and Turkey. In most OECD countries, the number of new medical graduates has gone up since 2000.

paediatricians, obstetricians/gynaecologists, psychiatrists, medical specialists and surgical specialists. Medical doctors not further defined include interns/residents if they are not reported in the field in which they are training, and doctors not elsewhere classified. The numbers are based on head counts.

### Comparability

In several countries (Canada, France, Greece, Iceland, the Netherlands, the Slovak Republic and Turkey), the data include not only physicians providing direct care to patients, but also those working in the health sector as managers, educators, researchers, etc. This can add another 5-10% of doctors. Data for Chile and Portugal refer to all physicians licensed to practice (resulting in a large overestimation of the number of practising doctors in Portugal, of around 30%). Data for Spain include dentists up to 2010, while data for Belgium include stomatologists. Data for India are likely over-estimated as they are based on medical registers that are not regularly updated to account for migration, death, retirement, and people registered in multiple states.

Not all countries are able to report all their physicians in the two broad categories of specialists and generalists because of missing information.

### Sources

- OECD (2015), *OECD Health Statistics* (Database).

### Further information

#### Analytical publications

- Ono, T., G. Lafortune and M. Schoenstein (2013), "Health Workforce Planning in OECD Countries: A Review of 26 Projection Models from 18 Countries" *OECD Health Working Papers*, No. 62, OECD Publishing.
- OECD (2008), "The Looming Crisis in the Health Workforce: How can OECD Countries Respond?", *OECD Health Policy Studies*, OECD Publishing.

#### Statistical publications

- OECD (2015), *Health at a Glance*, OECD Publishing.
- OECD (2014), *Health at a Glance: Asia/Pacific*, OECD Publishing.
- OECD (2014), *Health at a Glance: Europe*, OECD Publishing.

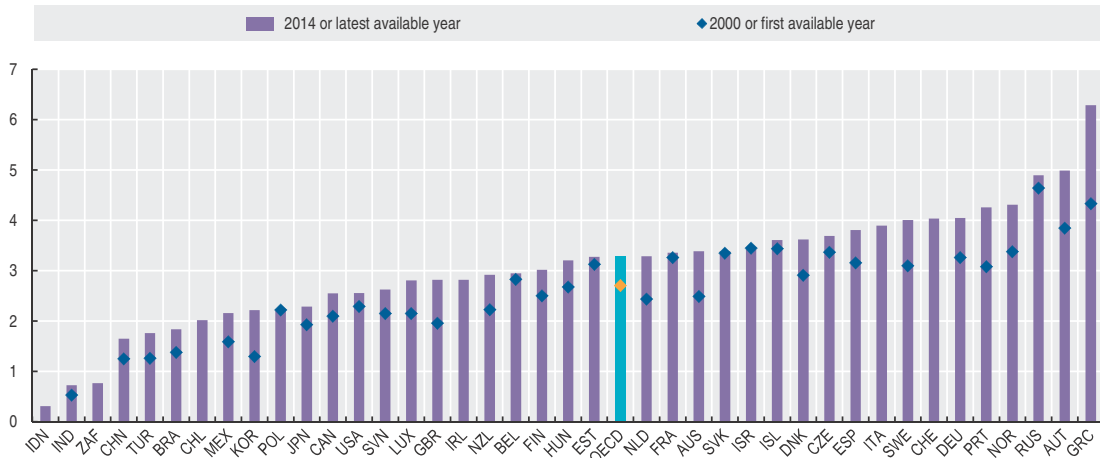
#### Websites

- OECD Health Statistics (supplementary material), [www.oecd.org/els/health-systems/health-statistics.htm](http://www.oecd.org/els/health-systems/health-statistics.htm).



### Practising physicians

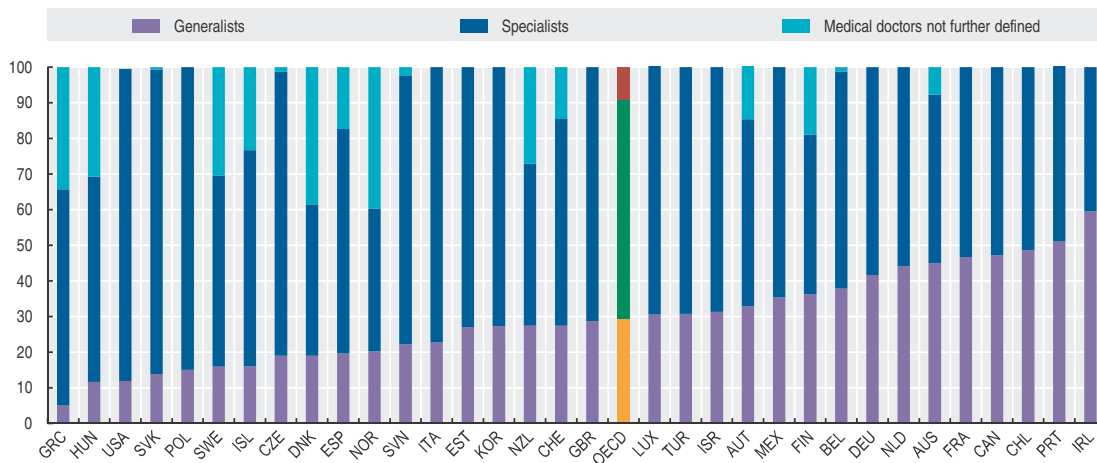
Per 1 000 inhabitants



1 2 <http://dx.doi.org/10.1787/888933334872>

### Categories of physicians

As a percentage of total physicians, 2013 or latest available year



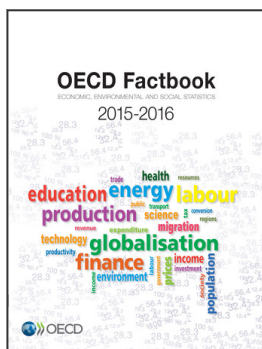
1 2 <http://dx.doi.org/10.1787/888933335765>

### Medical graduates

Per 100 000 inhabitants



1 2 <http://dx.doi.org/10.1787/888933335914>



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