

Medical graduates

The number of new medical graduates is a key indicator to assess the number of new entrants into the medical profession who will be available to replace retiring doctors and to respond to any current or future shortages. The number of medical graduates in any given year reflects decisions made a few years earlier related to student admissions, either through explicit *numerus clausus* policies (the setting of quotas on student admissions) or other decision-making processes.

Overall, the number of medical graduates across OECD countries increased from 93 000 in 2000 to 114 000 in 2010 and to 160 000 in 2021. In 2021, the number of new medical graduates ranged from about 7 per 100 000 population in Israel, Japan and Korea to more than 20 per 100 000 in Latvia, Ireland, Denmark and Lithuania (Figure 8.20).

In Ireland, the high number of medical graduates is due to the large share of international medical students, who in recent years have made up about half of all students. Many of these international students in Irish medical schools come from Canada, the United States and the United Kingdom. In most cases, they leave Ireland after graduation – either because they prefer to complete their training and practise in their home country or because they cannot secure an internship in Ireland. This results in a paradoxical situation where Ireland needs to import doctors trained in other countries to address doctor shortages (OECD, 2019^[1]).

In several Central and Eastern European countries, this internationalisation of medical education is also reflected in a growing number of international medical students and graduates. Many medical schools in Romania, Bulgaria, the Slovak Republic, the Czech Republic, Hungary and Poland are attracting a growing number of international medical students, often by offering programmes in English. In most cases, these international students do not stay in the country after graduation (OECD, 2019^[1]).

In Israel, the low number of domestic medical graduates is compensated by the high number of foreign-trained doctors (about 60% of all doctors). A large share of these foreign-trained doctors are in fact Israeli-born doctors who have returned to Israel after completing their first degree abroad because of the limited number of places in Israeli medical schools (OECD, 2023^[2]).

The number of new medical graduates per 100 000 population has increased in all OECD countries since 2000 in response to concerns about current or future shortages of doctors, but with varying growth rates. Leaving aside Ireland, where a large part

of the growth was driven by growing intakes of international students, near two-fold increases occurred in countries such as Italy and Canada, while the increase reached over 50% in the Netherlands, Spain, the United Kingdom and the United States. Growth was more modest in Japan, although the number of students admitted to medical schools has increased since 2008, resulting in increases in the number of medical graduates since 2014 (Figure 8.21).

Following the pandemic, most OECD countries that responded to a policy questionnaire administered to ministries of health in early 2022 reported that they had recently increased student intakes in medical education and training programmes in response to concerns about current or future shortages. Most countries also reported that they were providing some incentives to encourage more students to choose general practice for their postgraduate internship/residency training to address shortages of GPs more specifically (OECD, 2023^[3]).

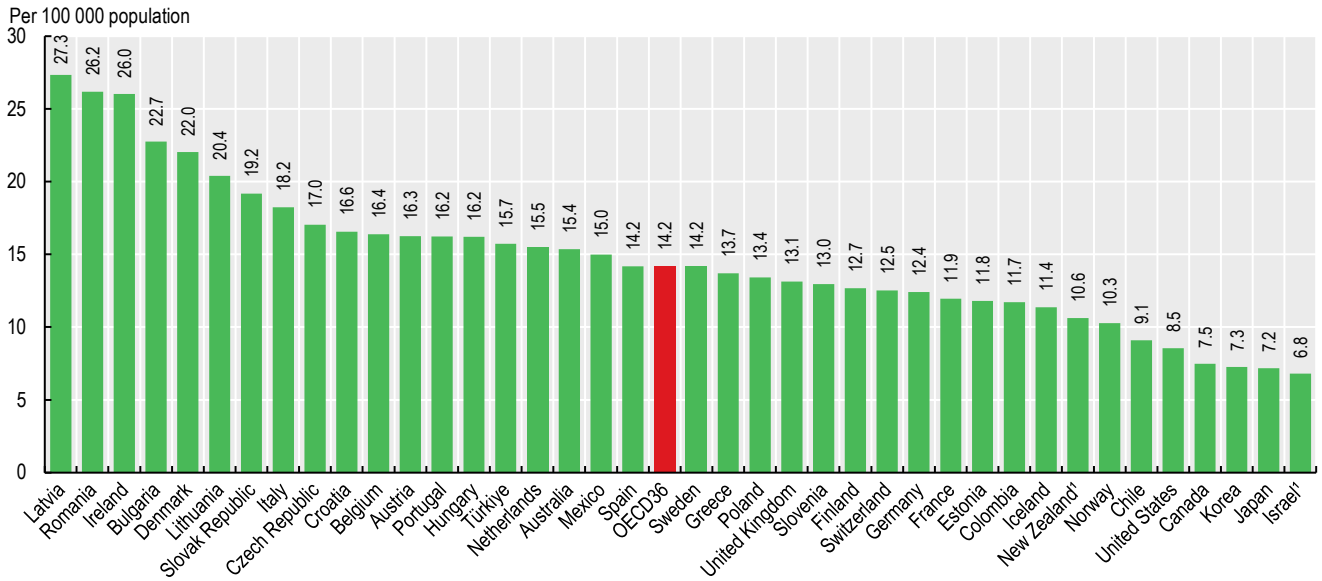
Definition and comparability

Medical graduates are defined as students who have graduated from medical schools in a given year. In nearly all countries, medical graduates include both domestic students and international students, with the exception of Israel and New Zealand, where international students are excluded (in Israel this is because in nearly all cases these international students do not stay in Israel after graduation).

References

- OECD (2023), *OECD Report on Medical Education and Training in Israel*, OECD, Paris, <https://www.oecd.org/health/OECD-report-on-medical-education-and-training-in-Israel.pdf>. [2]
- OECD (2023), *Ready for the Next Crisis? Investing in Health System Resilience*, OECD Health Policy Studies, OECD Publishing, Paris, <https://doi.org/10.1787/1e53cf80-en>. [3]
- OECD (2019), *Recent Trends in International Migration of Doctors, Nurses and Medical Students*, OECD Publishing, Paris, <https://doi.org/10.1787/5571ef48-en>. [1]

Figure 8.20. Medical graduates, 2021 (or nearest year)



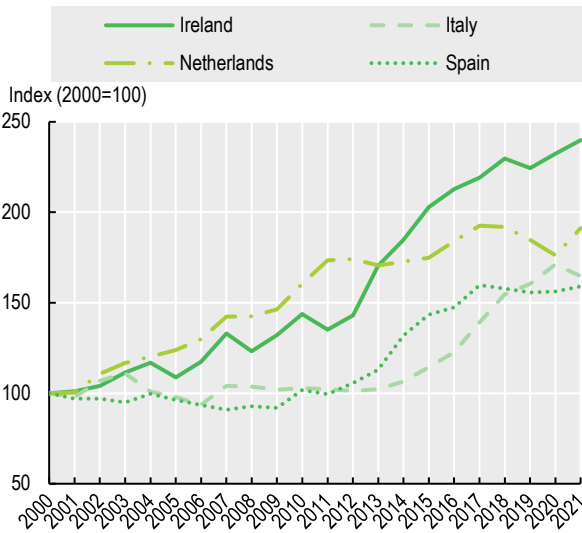
Note: A large number of medical graduates are international students in some countries (e.g. Romania, Ireland, Bulgaria, the Slovak Republic, the Czech Republic and Hungary). 1. Data exclude international students, resulting in an underestimation (about 15% of graduates in Israel and 5% in New Zealand were international students in 2021).

Source: OECD Health Statistics 2023.

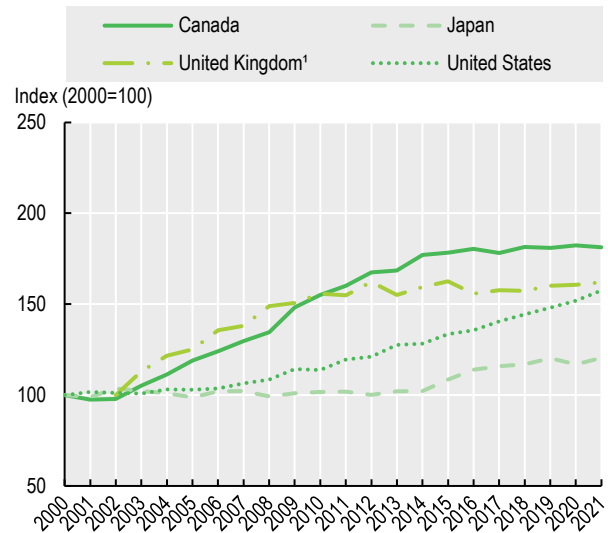
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Figure 8.21. Evolution in the number of medical graduates, selected OECD countries, 2000-21

Countries above OECD average in graduates per capita in 2021



Countries below OECD average in graduates per capita in 2021



1. Index for the United Kingdom, 2002=100.

Source: OECD Health Statistics 2023.

StatLink <https://stat.link/r761pj>



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