

Consultations with doctors can take place in doctors' offices or clinics, in hospital outpatient departments or, in some cases, in patients' own homes. In many EU countries (e.g. Denmark, Italy, the Netherlands, Portugal, the Slovak Republic and Spain), patients are required or given incentives to consult a general practitioner (GP) about any new episode of illness. The GP may then refer them to a specialist, if indicated. In other countries, patients may approach specialists directly.

In 2014, the number of doctor consultations per person per year was highest in Hungary, the Slovak Republic and the Czech Republic, and lowest in Sweden, Portugal, Finland and Denmark (Figure 7.14). The EU average is about seven consultations per person per year, with most countries reporting five to eight visits. Cultural factors appear to play a role in explaining some of the variations across countries, but certain health system characteristics also seem to matter. Some countries which pay their doctors mainly by fee-for-service tend to have above-average consultation rates (e.g. the Slovak Republic, the Czech Republic and Germany), whereas other countries that have mostly salaried doctors tend to have below-average rates (e.g. Sweden and Finland).

In Sweden and Finland, the low number of doctor consultations may also be explained partly by the fact that nurses and other health professionals play an important role in primary care centres, lessening the need for consultations with doctors (Delamaire and Lafortune, 2010).

In many European countries, the average number of doctor consultations per person has increased since 2000. This is consistent with the increase in the number of doctors per capita in most countries over that period (see indicator on doctors in this chapter). In the Czech Republic and the Slovak Republic, there has been a reduction in the number of doctor consultations per capita since 2000, although the number still remains well above the EU average.

Information on the number of doctor consultations per person can be used to estimate the annual numbers of consultations per doctor. This indicator is a very crude measure of doctors' productivity, since consultations can vary in length and effectiveness, and because it excludes the work doctors do on hospital inpatients, administration and research. Keeping these reservations in mind, the estimated number of consultations per doctor is highest in Hungary, the Slovak Republic, Poland and the Czech Republic, and lowest in Sweden, followed by Denmark, Austria and Finland (Figure 7.15). However, the duration of consultations with doctors in Sweden tends to be longer than in other countries such as the United Kingdom, the Netherlands and Germany where most consultations last less than 15 minutes (Commonwealth Fund, 2015).

Looking at trends over time in the estimated number of consultations per doctor per year, the number has decreased at least slightly in Sweden, Finland and Austria,

as the number of doctors has increased more rapidly than the number of consultations, whereas it has remained relatively stable and at a higher level in Germany and Poland (Figure 7.16). In the Czech Republic, the reduction in the number of consultations per doctor in 2008 was due to a significant reduction in the number of consultations per person starting that year.

Definition and comparability

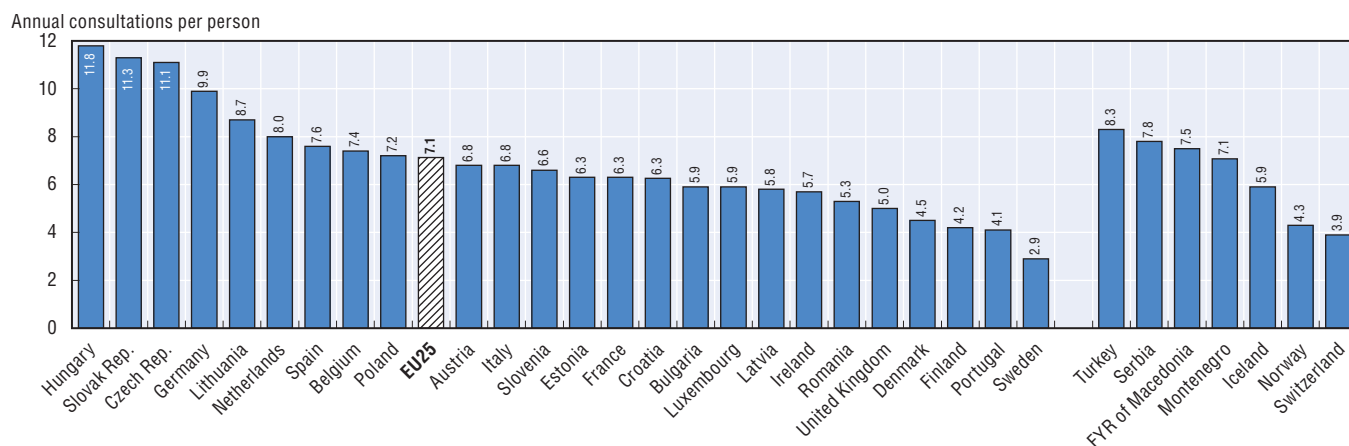
Consultations with doctors refer to the number of contacts with physicians, including both generalists and specialists. There are variations across countries in the coverage of different types of consultations, notably in outpatient departments of hospitals. The data come mainly from administrative sources, although in some countries (Ireland, Italy, the Netherlands, Spain, Switzerland and the United Kingdom) the data come from health interview surveys. Estimates from administrative sources tend to be higher than those from surveys because of problems with recall and non-response rates.

In Hungary, the data include consultations for diagnostic exams, such as CT and MRI scans (resulting in an over-estimation). The data for the Netherlands exclude contacts for maternal and child care. The data for Portugal exclude visits to private practitioners, while those for the United Kingdom exclude consultations with specialists outside hospital outpatient departments (resulting in an under-estimation). In Germany, the data include only the number of cases of physicians' treatment according to reimbursement regulations under the Social Health Insurance Scheme (a case only counts the first contact over a three-month period, even if the patient consults a doctor more often, leading to an under-estimation). Telephone contacts are included in a few countries (e.g. Spain and the United Kingdom). In Turkey, a majority of consultations with doctors occur in outpatient departments in hospitals.

References

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- Delamaire, M.L. and G. Lafortune (2010), "Nurses in Advanced Roles: A Description and Evaluation of Experiences in 12 Developed Countries", *OECD Health Working Papers*, No. 54, OECD Publishing, Paris, <http://dx.doi.org/10.1787/5kmbrcfms5g7-en>.

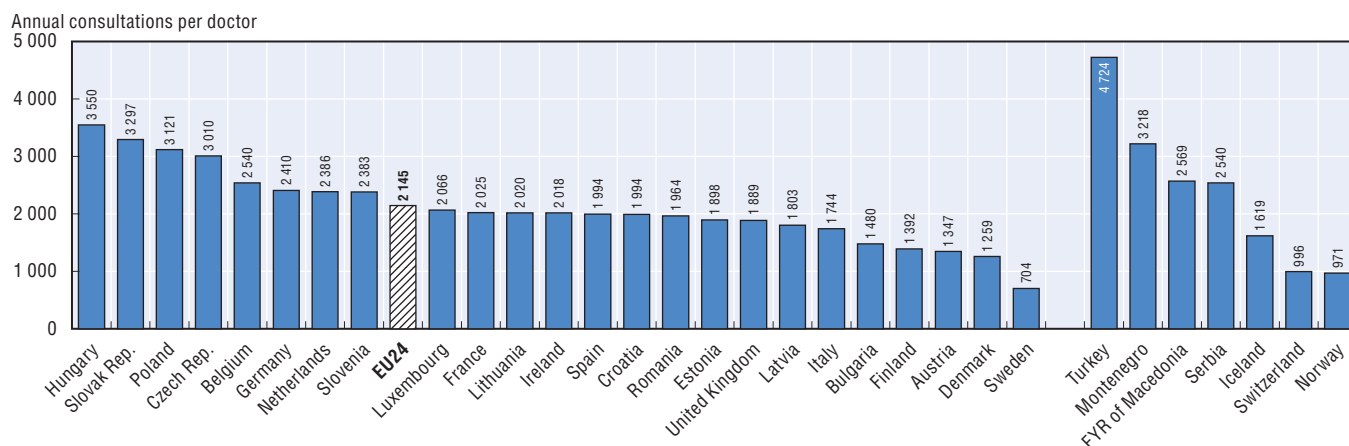
7.14. Number of doctor consultations per person, 2014 (or nearest year)



Source: OECD Health Statistics 2016; Eurostat Database.

StatLink <http://dx.doi.org/10.1787/888933429839>

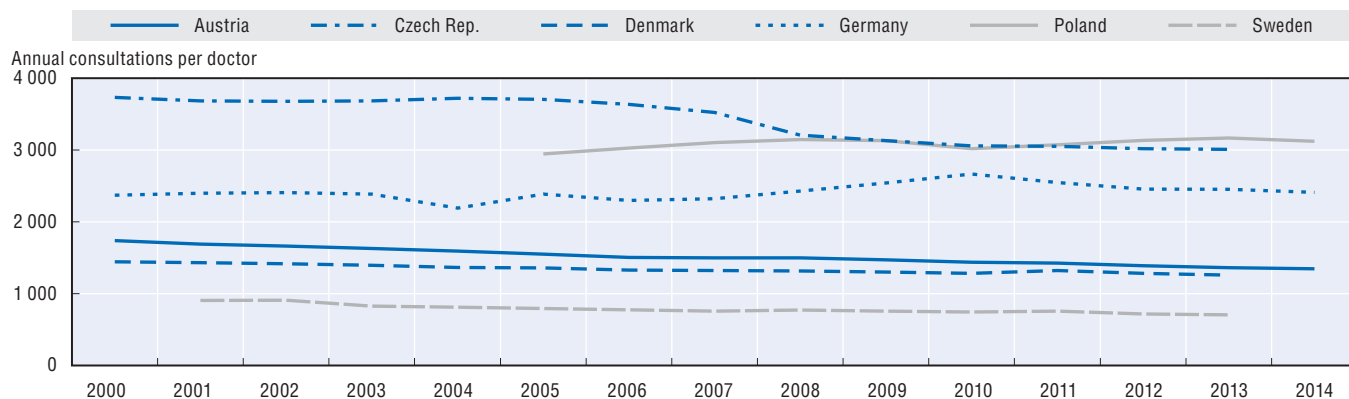
7.15. Estimated number of consultations per doctor, 2014 (or nearest year)



Source: OECD Health Statistics 2016; Eurostat Database.

StatLink <http://dx.doi.org/10.1787/888933429844>

7.16. Evolution in the estimated number of consultations per doctor, selected EU countries, 2000 to 2014



Source: OECD Health Statistics 2016.

StatLink <http://dx.doi.org/10.1787/888933429855>



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