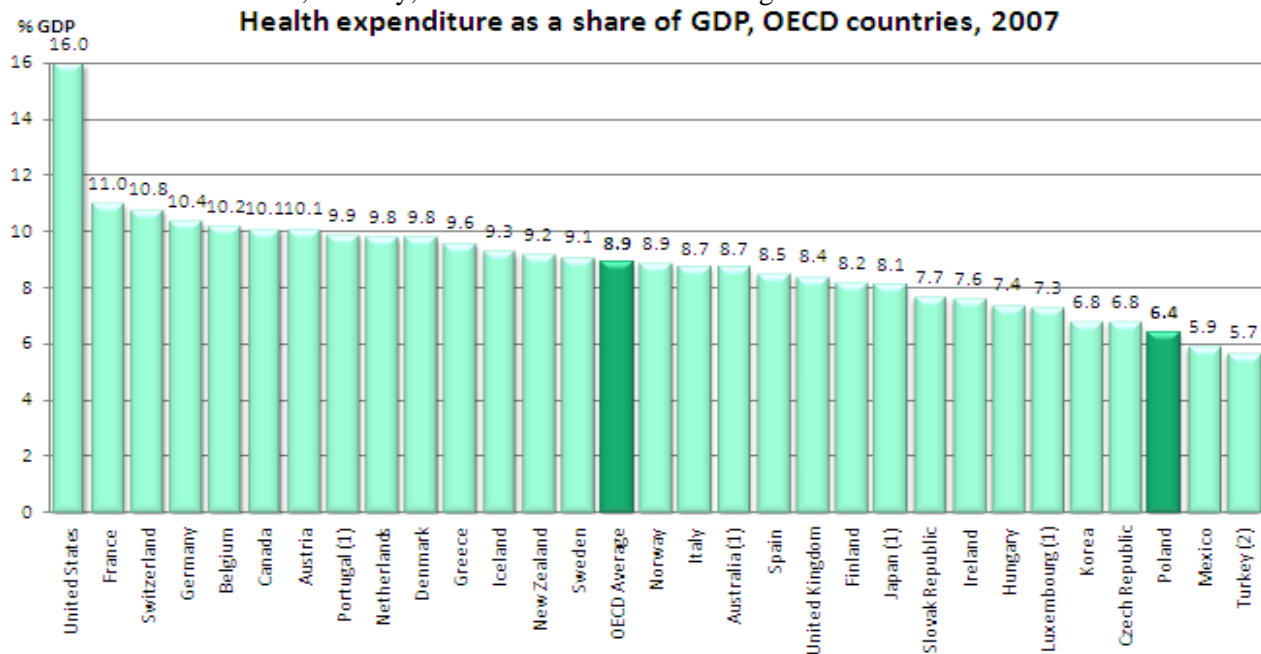




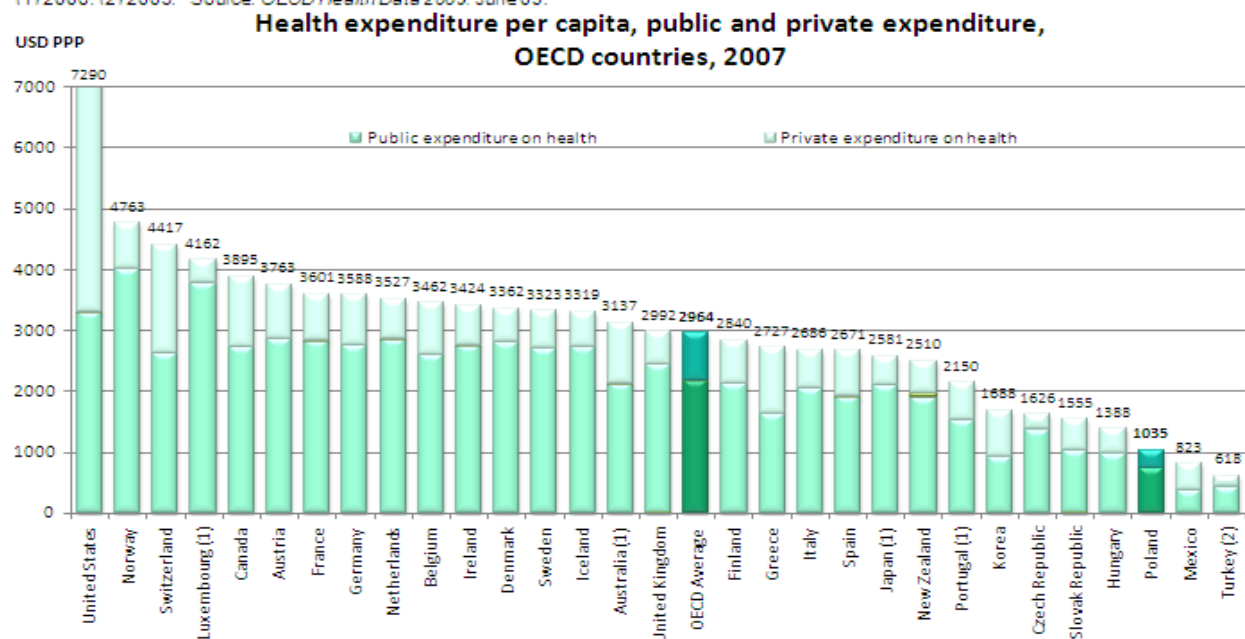
OECD Health Data 2009 How Does Poland Compare

Total health spending accounted for 6.4% of GDP in **Poland** in 2007, the third lowest share among OECD countries and 2.5 percentage points lower than the OECD average of 8.9%. The United States is, by far, the country that spends the most on health as a share of its economy, with 16% of its GDP allocated to health in 2007, followed by France (11.0%), Switzerland (10.8%) and Germany (10.4%).

Poland also ranks below the OECD average in terms of health spending per capita, with spending of 1035 USD in 2007 (adjusted for purchasing power parity), compared with an OECD average of 2964 USD. Only Mexico and Turkey had lower per capita spending. Countries with high health spending per capita include the United States, Norway, Switzerland and Luxembourg.



(1) 2006. (2) 2005. Source: OECD Health Data 2009, June 09.



(1) 2006. (2) 2005. Data for Belgium, Denmark and the Netherlands are current expenditures (excluding investment). Source: OECD Health Data 2009, June 09. Data are expressed in US dollars adjusted for purchasing power parities (PPPs), which provide a means of comparing spending between countries on a common base. PPPs are the rates of currency conversion that equalise the cost of a given 'basket' of goods and services in different countries.

The strong rise in pharmaceutical spending has been one of the factors behind the rise in total health spending in **Poland** as well as in many other OECD countries. In 2007, spending on pharmaceuticals accounted for 24.5% of total health spending in **Poland**, well above the OECD average of 17.1%. In fact, **Poland** ranks fifth among OECD countries for spending on pharmaceuticals as a proportion of total health expenditure, behind Hungary, the Slovak Republic, Greece and Korea.

The public sector is the main source of health funding in all OECD countries, except Mexico and the United States. In **Poland**, 70.8% of health spending was funded by public sources in 2007, below the average of 73%. In 2007, public spending was the highest in Luxembourg at 90.9% and relatively high (above 80%) in several Nordic countries (Denmark, Norway, Iceland, and Sweden), the Czech Republic, the United Kingdom, Japan and Ireland.

Resources in the health sector (human, physical, technological)

In 2007, **Poland** had 2.2 practicing physicians per 1 000 population, compared to 3.1 on average across all OECD countries. There were 5.2 qualified nurses per 1 000 population, also below the average in OECD countries of 9.6.

The number of acute care hospital beds in **Poland** was 4.6 per 1 000 population in 2007, more than the OECD average of 3.8 beds per 1 000 population. As in most OECD countries, the number of hospital beds per capita in **Poland** has fallen over time. This decline has coincided with a reduction of average length of stays in hospitals and an increase in the number of surgical procedures performed on a same-day (or ambulatory) basis.

During the past decade or so, there has been rapid growth in the availability of diagnostic technologies such as computed tomography (CT) scanners and magnetic resonance imaging (MRI) units in most OECD countries. In **Poland**, the number of CT and MRI scanners was 9.7 and 2.7 per million population respectively in 2007, well below the OECD averages of 20.2 and 11. Japan, the United States, Iceland, Italy, Austria and Korea all have high numbers of CT and MRI scanners per capita.

Health status and risk factors

Most OECD countries have enjoyed large gains in life expectancy over the past decades, thanks to improvements in living conditions, public health interventions and progress in medical care. In 2007, life expectancy at birth in **Poland** stood at 75.4 years, below the OECD average of 79 years. Only a small number of OECD countries, including Mexico, the Slovak Republic, Hungary and Turkey, had lower life expectancies.

The infant mortality rate in **Poland**, as in other OECD countries, has fallen greatly over the past decades. It stood at 6.0 deaths per 1 000 live births in 2007, above the OECD average of 4.9. Infant mortality is lowest in Japan, Luxembourg, Ireland and in Nordic countries (Iceland, Sweden, Norway and Finland).

The proportion of daily smokers among adults has shown a marked decline over the past two decades in most OECD countries. The daily smoking rate among adults in **Poland** was 26.3% of the adult population in 2004, slightly above the OECD average of 23.3%, but well below **Poland's** 1992 rate of 41.5%.

At the same time, obesity rates have increased in recent decades in all OECD countries, although there remain notable differences across countries. In **Poland**, the obesity rate among adults, based on self-report, was 12.5% in 2004. It is lower than the OECD average of 15.1%, and much lower than the corresponding rate for United States (34.3% in 2006) and the United Kingdom (24.0% in 2007)¹.

¹ The data for the United States and the United Kingdom are more accurate than those from most other countries since they are based on *actual measures* of people's height and weight, while estimates for most other countries are based on *self-reported* data, which generally under-estimate the real prevalence of obesity.

More information on *OECD Health Data 2009* is available at www.oecd.org/health/healthdata.

For more information on OECD's work on **Poland**, please visit www.oecd.org/poland.