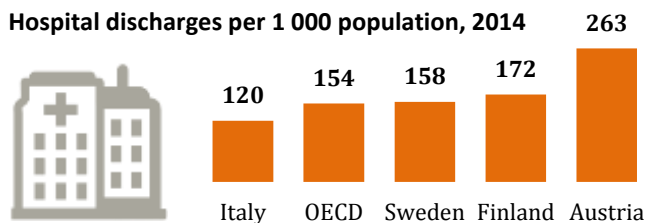


The Austrian health system generally provides good access to health care services through a relatively high degree of human and physical resources. However, the available resources are centred on hospital inpatient care and somatic care. Primary care could be strengthened in order to avoid unnecessary hospitalisations and a stronger focus on mental ill-health is needed. Efforts are also required to prevent the spread of risk factors such as harmful alcohol and tobacco consumption.

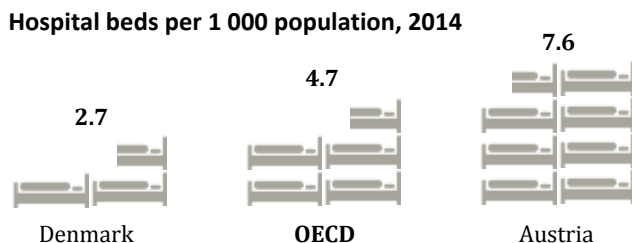
Reduce unnecessary hospitalisations

► The Austrian health system has a strong focus on hospital inpatient care

Austria has the highest hospital discharge rate among all OECD countries, being 70% above the OECD average. This cannot be explained by a different population structure or need; Nordic countries such as Finland and Sweden have a higher proportion of people aged over 65 than Austria, but much lower hospital admissions and discharges.



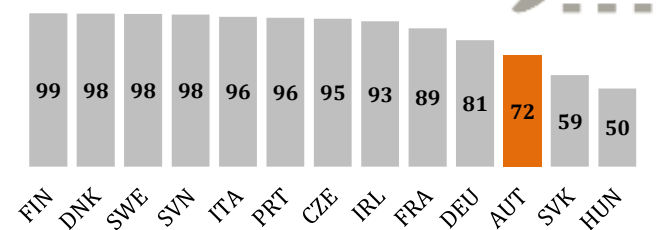
Consistent with the high hospitalisation rate is the greater availability of hospital resources. With 7.6 hospital beds per 1 000 inhabitants, Austria has the fourth highest number of hospital beds across the OECD.



► Austria uses ambulatory surgery less frequently than its European OECD peers

Although the share of cataract surgeries performed on a same-day basis has grown rapidly since 2000, it is still considerably lower than in a majority of OECD countries where nearly all cataract surgeries are performed in an ambulatory setting.

Share of cataract surgeries carried out as ambulatory cases, 2014



» What can be done?

- Reduce avoidable hospital admissions for those cases that could be treated in a primary care setting
- Encourage hospitals to use day-case surgery instead of inpatient treatment for those conditions where it is deemed appropriate, such as elective surgery

To read more about our work:

[Health at a Glance 2015](#)

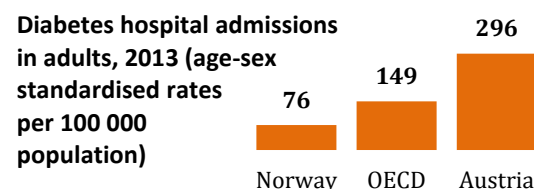
Strengthen primary care

► Austria has relatively high hospital admission rates for chronic conditions including asthma and chronic obstructive pulmonary disease (COPD), diabetes and congestive heart failure

Such chronic conditions can be effectively managed in primary care without requiring hospital admission. Greater efforts are needed to improve the continuity of care for the growing number of people living with one or more chronic diseases to reduce unnecessary hospital use.

To read more about our work:

[Health at a Glance 2015](#)



» What can be done?

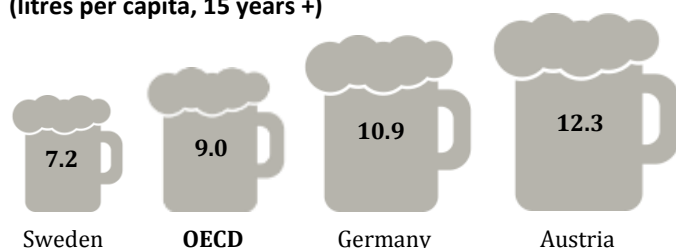
- Strengthen disease management for chronic conditions at primary care level by developing patient-centred programmes
- Continue to support the development of multi-disciplinary primary care teams to effectively assure care continuity

► Austrians are among the top consumers of alcoholic beverages in the OECD

Austria has made some progress in reducing alcohol consumption among adults over the past decade. However, with about 12 litres of pure alcohol per adult per year, Austrians drink considerably more than the OECD average and are among the top consumers of alcoholic beverages.

Harmful alcohol use is associated with numerous health and social consequences, including an increased risk of a range of cancers, stroke and liver cirrhosis, among others. Foetal exposure to alcohol increases the risk of birth defects and intellectual impairment. Alcohol also contributes to death and disability through accidents and injuries, assault, violence, homicide and suicide.

Alcohol consumption, 2014 or nearest year (litres per capita, 15 years +)

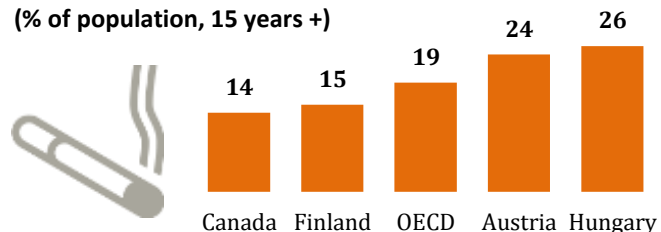


► Little progress has been achieved in reducing tobacco consumption

In 2014, rates of adults reporting that they smoke every day are as high as in 1997 (24%) and have in fact increased slightly since 2006 (23%). This is in contrast to the marked decline in smoking rates seen in many OECD countries – on average, smoking rates have decreased from 26% in 2000 to 19% in 2014.

Smoking habits in men and women have followed different paths over the past two decades. While the proportion of male daily smokers has come down from 30% in 1997 to 27% in 2014, daily smoking in women has risen from 19% to 22% over the same period.

Daily smoking in adults, 2014 or nearest year (% of population, 15 years +)



» What can be done?

- Alcohol policy should target heavy drinkers first, but broader approaches are also needed to tackle harmful drinking
- Implement fiscal and pricing policies aimed at reducing the consumption of alcoholic beverages and tobacco products
- Consider restricting sales of alcoholic beverages (e.g. prohibiting sales in petrol stations) and prohibit point of sale display of tobacco products
- Encourage primary care physicians to counsel at risk patients about making healthy lifestyle choices

To read more about our work:

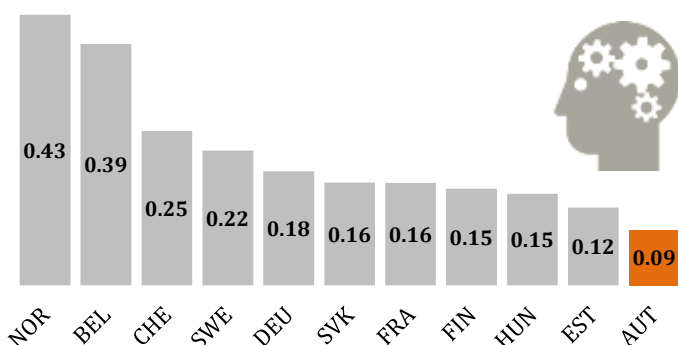
[Tackling Harmful Alcohol Use: Economics and Public Health Policy](http://www.oecd.org/health/economics-of-prevention.htm)
www.oecd.org/health/economics-of-prevention.htm
[Health at a Glance 2015](#)

Put stronger focus on mental health care

► The Austrian health care system puts insufficient focus on mental ill-health

Despite the second highest rate of physicians in the OECD, the density of psychiatrists in Austria is only around the OECD average. Similarly, the low ratio of psychiatric to non-psychiatric care hospital beds shows that, in relative terms, very few resources go into mental health care.

Ratio of psychiatric to non-psychiatric care beds, 2014



Suicide, which is often linked to mental ill-health and the abuse of alcohol and other substances, is more common in Austria (13.9 deaths per 100 000 population in 2014) than in the OECD on average (12.1). Early detection in high-risk groups by families and health professionals is an important part of suicide prevention campaigns, together with the provision of effective support and treatment.

» What can be done?

- Shift resources to improve mental health care, especially primary care, psychotherapy, child psychiatry and care provision in rural areas
- Give general practitioners a greater role and increase their competency in mental health care

To read more about our work:

[Mental Health and Work: Austria](#)
[Health at a Glance 2015](#)