

Health Statistics in the Nordic Countries 2004  
*Helsestatistik for de nordiske lande 2004*



# Health Statistics in the Nordic Countries 2004

Helsestatistik for de nordiske lande 2004

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Schultz Information  
Herstedvang 12  
DK-2620 Albertslund  
Phone: +45 70 26 26 36  
Fax: +45 43 63 62 45  
E-mail: [schultz@schultz.dk](mailto:schultz@schultz.dk)

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*Members of the Editorial Committee for 'Health Statistics in the Nordic Countries'*  
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|                 |                                                                                                                                                                                                   |                                                                                                                                                   |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Danmark</b>  | Specialkonsulent Jakob Lynge Sandegaard<br>Sundhedsstyrelsen<br>Islands Brygge 67<br>DK-2300 København S                                                                                          | <b>Editor</b><br><b>Redaktør</b><br><br>Head of Secretariat Johannes Nielsen<br>NOMESCO's Secretariat<br>Islands Brygge 67<br>DK-2300 København S |
| <b>Færøerne</b> | Landslæge Hogni Debes Joensen<br>Sigmundargøta 5<br>FO-100 Tórshavn<br><br>Rádgiver Jóanis Erik Kótlum<br>Social - og sundhedsministeriet<br>Eirargardur 2<br>FO-100 Tórshavn                     |                                                                                                                                                   |
| <b>Grønland</b> | Vikarierende Embedslæge Flemming Stenz<br>Embedslægeinstitutionen i Grønland<br>Postboks 120<br>DK-3900 Nuuk                                                                                      |                                                                                                                                                   |
| <b>Finland</b>  | Utvecklingschef Mika Gissler<br>STAKES<br>Postbox 220<br>FIN-00531 Helsingfors                                                                                                                    |                                                                                                                                                   |
| <b>Åland</b>    | Hälsovårdsinspektör Eivor Nikander<br>Ålands landskapsregering<br>Postbox 1060<br>AX-22111 Mariehamn                                                                                              |                                                                                                                                                   |
| <b>Island</b>   | Konsulent Sigríður Vilhjálmsdóttir<br>Hagstofa Íslands<br>Borgartún 21a<br>IS-150 Reykjavík                                                                                                       |                                                                                                                                                   |
| <b>Norge</b>    | Seniorrådgiver Jens-Kristian Borgan<br>Statistisk sentralbyrå<br>Postboks 8131 Dep.<br>N-0033 Oslo<br><br>Seniorrådgiver Linda Grytten<br>Statens helsetilsyn<br>Postboks 8128 Dep<br>N-0032 Oslo |                                                                                                                                                   |
| <b>Sverige</b>  | Utvecklingsledare Lars Johansson<br>Sveriges Kommuner och Landsting<br>SE-118 82 Stockholm<br><br>Utredare Ingalill Paulsson Lütz<br>Socialstyrelsen, EpC<br>SE-106 30 Stockholm                  |                                                                                                                                                   |

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# Preface

## *Forord*

The aim of NOMESCO is partly to establish a basis for comparable medical statistics in the Nordic countries, partly to initiate development projects of relevance to medical statistics, and to follow international trends in questions of medical statistics.

In this publication NOMESCO presents the latest available data from the health statistics of the Nordic countries.

In relation to previous versions of this publication, this version is shorter, with more detailed statistics in the web version, as a pdf file.

Section B deals with Out-Patient-Care.

On the NOMESCO homepage at [www.nom-nos.dk](http://www.nom-nos.dk) you will find, as mentioned above, a more extensive web version as a pdf file, and additional information, including an interactive database and detailed data on hospital discharges, patients treated, procedures, new cases of cancer and causes of death.

*Nordic Medico-Statistical Committee  
(NOMESCO)*

Målsætningen for NOMESKO er dels at skabe grundlag for sammenlignelig medicinalstatistik i de nordiske lande, dels at tage initiativ til udviklingsprojekter med medicinalstatistisk relevans og endelig at følge den internationale udvikling i medicinalstatistiske spørgsmål.

I denne publikation offentliggør NOMESKO de senest tilgængelige data fra de nordiske landes sundhedsstatistik.

I forhold til de forrige udgaver af publikationen er denne udgave en forkortet version, hvor mere detaljerede statistikoplysninger findes i bogens Web-version som pdf. fil.

Sektion B er et tema om Patienter i Öppen Vård.

På NOMESKO's hjemmeside på [www.nom-nos.dk](http://www.nom-nos.dk) findes der som nævnt en udvidet bogudgave som pdf fil og supplerende informationer, blandt andet en interaktiv database samt detaljerede data om udskrivninger, patienter behandlet, procedurer, nye tilfælde af cancer og dødsårsager.

*Nordisk Medicinalstatistisk Komité  
(NOMESKO)*



## SECTION A

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Health Statistics 2004  
Helsestatistik 2004

## CHAPTER I

# Organization of health services Organiseringen af sundhedsvæsenet

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## Introduction

In the Nordic countries, the health services are a public matter.

All countries have well-established systems of primary health care. In addition to general medical practitioner services, preventive services are provided for mothers and infants, and school health care and dental care for children and young people. Preventive occupational health services and general measures for the protection of the environment exist in all the countries.

The countries generally have well-developed hospital services with advanced specialist treatment.

Specialist medical treatment is also offered outside hospitals.

The health services are provided in accordance with legislation, and they are largely financed by public spending or through compulsory health insurance schemes.

In all countries, however, there are some patient charges for treatment and pharmaceutical products.

Salary or cash allowances are payable to employees during illness. Self-employed people have the possibility to insure themselves in case of illness.

## Indledning

I de nordiske lande er sundhedsvæsenet et offentligt anliggende.

Alle landene har et veletableret primært sundhedsvæsen. Som supplement til den almindelige lægepraksis er der iværksat forebyggende initiativer over for mødre og spædbørn og etableret skolesundhedsordninger og skoletandplejeordninger for børn og unge. Der er ligeledes etableret forebyggende bedriftssundhedstjenester og almindelige foranstaltninger til miljøbeskyttelse i alle landene.

Som helhed har landene et veludbygget sygehusvæsen med en højt udviklet specialistbehandling.

Speciallægebehandling tilbydes også uden for sygehusene.

Ydelserne i sundhedsvæsenet gives i henhold til love, og de fleste af dem er offentligt finansieret eller finansieret gennem lovpligtige sygeforsikringsordninger.

Der skal dog erlægges en vis egenbetaling for lægemidler og i en vis udstrækning også for behandling.

Under sygdom får lønmodtagere enten udbetalt en kontantydelse eller løn. Selvstændige erhvervsdrivende har mulighed for at forsikre sig ved sygdom.

### 1.1. Current and future changes in the health services

**DENMARK:** In order to increase activity in health services and to reduce waiting times for examination and treatment, the Danish Government allocated an extra DKK 1.5 billion to health services in 2002. In 2003, 2004, 2005 and 2006, this has been followed up with an extra DKK 1.0, 1.1, 1.2 and 1.4 billion respectively. This increased activity has been combined with extra choices for patients. Among other things, it is now possible for patients to receive treatment at a private hospital or a hospital abroad that has a contract with the public authorities, when waiting time for treatment at a public hospital is longer than two months. From 2007, patients will have the possibility to receive treatment at a private hospital when they have waited more than one month.

These measures have had a considerable effect. From 2001 to 2004, the number of people who have received treatment in somatic hospitals has increased by 296 000. During the period 2001 to 2004, the number of people who have had an operation has increased by 87 500. Waiting times have been reduced from 27 weeks to 21 weeks for 18 major surgical procedures from July 2002 to July 2005. During the period 1 July 2002 to the end of June 2005, 62 000 patients have chosen to make use of their extended right to free choice of hospital. In 2004, 12 per cent of all non-acute patients were treated outside their own county.

### 1.1. Igangværende og kommende ændringer i sundhedsvæsenet

**DANMARK:** For målrettet at øge aktiviteten i sundhedsvæsenet og nedbringe ventetiderne til undersøgelse og behandling tilførte regeringen i 2002 ekstra 1,5 mia. DKK til sundhedsvæsenet. I 2003, 2004, 2005 og 2006 er der blevet fulgt op med flere ekstrabevillinger til sundhedsvæsenet på hhv. 1,0, 1,1, 1,2 og 1,4 mia. DKK. Den øgede aktivitet er kombineret med flere valgmuligheder for patienterne. Blandt andet har patienterne fået mulighed for at søge behandling på et privat sygehus eller et sygehus i udlandet, der har indgået aftale med det offentlige, når ventetiden til de offentlige sygehuse overstiger 2 måneder. Fra 2007 vil patienternes mulighed for at søge behandling på et privat sygehus indtræde efter 1 måneds ventetid.

Indsatsen har haft en betydelig effekt. Fra 2001 til 2004 er antallet af personer, som har modtaget behandling i det somatiske sygehusvæsen, øget med 296.000. I perioden 2001 til 2004 er antallet af personer, der har fået foretaget en eller anden form for operation, øget med 87.500. Ventetiderne er reduceret fra ca. 27 uger til ca. 21 uger for 18 vigtige operationer fra juli 2002 til juli 2005. I perioden fra den 1. juli 2002 til udgangen af juni 2005 har ca. 62.000 patienter valgt at benytte muligheden for udvidet frit sygehusvalg. I 2004 blev 12 pct. af alle ikke-akutte basispatienter behandlet uden for eget amt.

At the beginning of 2004, the Ministry of the Interior and Health, Danish Regions and the Joint Metropolitan Hospital Service (HS) carried out an evaluation of the free choice of hospital arrangement. The evaluation showed that in general both patients and public and private hospitals are satisfied with the way the arrangement works. However, the evaluation indicated certain problems, mainly in relation to information and referral of patients.

According to the economic agreement for 2004, the government and Danish Regions have agreed that management of funding by the hospitals shall gradually be expanded. The counties determine the budget with the individual hospitals and the hospitals allocate funds to the different departments in an appropriate way, so as to achieve effective production of services. From 2004 the counties shall, one at a time, allocate a minimum of 20 per cent of funds to their own hospitals directly on the basis of production.

In 2005, an evaluation was carried out of experience gained from the counties' use of management of funding and the effect of the system. The evaluation showed that management of funding has predominantly had a positive effect on hospital services. Management of funding has thus contributed to increased activity, reduced waiting times and increased focus on efficiency. However, management of funding has led to increased uncertainty about hospital budgets.

The Danish Government has decided that the proportion of this type of funding shall be increased to 50 per cent of the hospitals' funding over the next few years.

Indenrigs- og Sundhedsministeriet, Finansministeriet, Amtsrådsforeningen og H:S (Hovedstadens sygehusfællesskab) har i starten af 2004 foretaget en evaluering af den udvidede fritvalgsordning. Evalueringen viste, at der generelt blandt både patienter og offentlige og private sygehuse er tilfredshed med, hvordan ordningen fungerer. Der blev dog i evalueringen givet udtryk for enkelte problemer vedr. hovedsageligt information og visitation af patienter.

Regeringen og Amtsrådsforeningen er i økonomiaftalen for 2004 blevet enige om, at anvendelsen af takststyring i forhold til sygehusene gradvist skal forøges. Amterne fastlægger afregningen med de enkelte sygehuse, og sygehusene skal i hensigtsmæssigt omfang kanalisere "takstmidlerne" videre ud på de udførende afdelinger for at understøtte en effektiv arbejdstilrettelæggelse. Fra 2004 skal amterne enkeltvist som minimum afregne 20 pct. af bevillingerne til egne sygehuse direkte på baggrund af præsteret aktivitet.

Der blev i 2005 gennemført en evaluering af erfaringerne med amternes anvendelse af samt effekterne af takststyring. Evalueringen viste, at takststyring overvejende har haft en positiv effekt i sygehusvæsenet. Takststyring har således medvirket til at skabe øget aktivitet, faldende ventetider og stigende fokus på omkostningsproduktivitet. Takststyring har imidlertid medført en øget budgetusikkerhed i sygehusvæsenet.

Regeringen har besluttet, at takstandelen over en årrække vil skulle øges til 50 pct. af sygehusenes bevillinger.

## ORGANIZATION OF HEALTH SERVICES

In 2002, the government appointed a Structure Commission to put forward a proposal for better and simpler organization of the public sector for the benefit of the population. The Commission submitted its report in January 2004. The Commission proposed a range of possible models for the structure of the public sector. Common for all the models is the recommendation that the present administrative units should be larger, in order to ensure that sufficient professional resources are available for the tasks that need to be performed.

The government's plan for the Structure Reform was presented in June 2004. For the health services this means that the counties will be replaced by five new regions from 1 January 2007. At the same time the number of municipalities will be reduced from 271 to 98. The municipalities and the regions will have a duty to cooperate with each other in coordinating treatment, training, prevention and care. An example of this is that the municipalities will take over responsibility for prevention and rehabilitation. For health services, the regions will be financed partly through block grants and activity-based grants from the state, and partly through a contribution from the municipalities. The contribution from the municipalities will consist of a fixed grant per inhabitant, plus a grant dependent on activity. Altogether, the reform means that the municipalities will be given a larger role in supplying health services.

During 2005, a series of new acts and regulations relating to the Structure Reform were passed by the Danish Parliament, including a new Health Act.

Regeringen nedsatte i 2002 en Strukturkommission, der skulle beskrive forslag til en bedre og mere enkel indretning af den offentlige sektor til gavn for borgerne. Kommissionen afgav sin betænkning i januar 2004, hvori en række mulige modeller blev opstillet for den offentlige sektors struktur. Fælles for modellerne er anbefalingen af, at de nuværende forvaltningsenheder bliver større med henblik på at sikre en tilstrækkelig faglig bæredygtighed i opgaveløsningen mv.

I juni 2004 forelå regeringens aftale om strukturreformen. For sundhedsområdet kommer den til at betyde, at amterne erstattes af fem nye regioner med virkning fra den 1. januar 2007. Samtidig reduceres antallet af kommuner fra 271 til 98 kommuner. Kommuner og regioner forpligtes til at samarbejde om sammenhæng i behandling, træning, forebyggelse og pleje. Dette sker bl.a. ved, at kommunerne overtager ansvaret for forebyggelse og genoptræning. På sundhedsområdet vil regionerne blive finansieret gennem dels et bloktilskud og et aktivitetsbaseret tilskud fra staten og dels et kommunalt bidrag. Det kommunale bidrag består dels af et fast tilskud pr. indbygger samt et aktivitetsafhængigt tilskud. Samlet indebærer reformen, at kommunerne tildeles en større rolle i sundhedsvæsenet.

Aftalen om strukturreform er i løbet af 2005 blevet udmøntet i en række love og bekendtgørelser, som er blevet vedtaget af Folketinget, herunder en ny sundhedslov.

The Liberal/Conservative Government's programme from February 2005 contains seven aims in the area of health. These include making waiting times shorter, developing a new action plan for cancer, and extending free choice of hospital by reducing the waiting time limit from two months to one month before private hospitals and hospitals abroad can be used. In addition, focus is directed at openness and transparency in health services, reorganization of specialist training, prevention of disease by improving lifestyle, and improvement of treatment for elderly patients.

**FAROE ISLANDS:** A new act relating to preventive health measures for children and young people was adopted in 2005 and came into force on 1 January 2006. The act is a compilation, modernization and harmonization of current legislation. The main change in relation to current legislation is that all pupils in primary and lower secondary schools shall now be offered two preventive health check-ups by their general practitioner. The first examination shall be offered when they start school, and the second before the end of compulsory schooling. Up until now, the school doctor has carried out health check-ups. In addition to their previous tasks, health visitors can now offer instruction for employees, for example, in day-care institutions.

Regeringsgrundlaget for VK-regeringen II fra februar 2005 indeholder syv målsætninger på sundhedsområdet. Disse koncentrerer sig blandt andet om forkortelsen af ventetider, en ny kræftbehandlingsplan og styrkelsen af det frie valg gennem nedsættelse af ventetidsgrænsen fra 2 til 1 måned før private eller udenlandske sygehuse kan benyttes. Derudover sættes der fokus på øget åbenhed og gennemsigtighed i sundhedsvæsenet, omlægning af speciallægeuddannelsen, forebyggelse af folkesygdomme gennem forbedret livsstil og forbedringer i behandlingen af ældre medicinske patienter.

**FÆRØERNE:** Ny Lagtingslov om forebyggende sundhedsordninger for børn og unge blev vedtaget i 2005 og får virkning fra 1. januar 2006. Loven er en sammenskrivning, modernisering og harmonisering af gældende ret. Ændringen jf. gældende ret omhandler primært, at alle elever i folkeskolen herefter får tilbud om to forebyggende helbredsundersøgelser hos egen praktiserende læge. Den første undersøgelse tilbydes ved skolestart og den næste inden den skolepligtige alder ophører. Hidtil har skolelægen forestået helbredsundersøgelserne. Sundhedsplejerskerne kan, foruden deres hidtidige opgaver tilmed tilbyde vejledning til ansatte i f.eks. daginstitutioner.

## ORGANIZATION OF HEALTH SERVICES

A new Tobacco Act was adopted in 2005. The aim of the act is to ensure that everyone has the right to a smoke-free environment. Smoking is forbidden in public institutions. The age-limit for buying tobacco is now 18 years. Previously it was 15 years. Advertising of tobacco, directly or indirectly, is prohibited. Tobacco can no longer be placed in sales-promoting positions in shops.

A new Hospital Act came into force in December 2005. The act shall help to improve teamwork/cooperation between hospitals. In addition, a professional board (Referral Board) shall be established, with the task of developing guidelines for referral of patients for treatment abroad.

**FINLAND:** The arrangement for subsidies for pharmaceutical products has been revised. Patient charges per item have been withdrawn for pharmaceutical products that are covered by the basic subsidy and the lower special subsidy. For pharmaceutical products in the higher special subsidy class, the insured person pays a contribution of EUR 3 for each product that is bought at one time.

Subsidies for pharmaceutical products are calculated as a percentage of the cost of the product. The basic subsidy is 42 per cent (previously 50 per cent), the lower special subsidy is 72 per cent (previously 75 per cent) and the higher special subsidy is 100 per cent (as before).

A patient contribution of EUR 1.50 is charged for all pharmaceutical products, when the maximum amount for patient contributions has been reached. Up until

Ny tobakslov blev vedtaget i 2005. Formålet med loven er at sikre alle retten til at færdes i et røgfrit miljø. Det er forbudt at ryge på offentlige institutioner. Aldersgrænsen for køb af tobaksvarer er fastsat til 18 år, den hidtidige aldersgrænse var 15 år. Det er ikke tilladt at reklamere med tobaksvarer, hverken direkte eller indirekte og tobaksvarer må ikke længere forefindes på salgsfremmende steder i butikkerne.

En ny sygehuslov trådte i kraft i december 2005. Loven skal være med til at bedre om samordningen/samarbejdet på tværs af sygehusene. I henhold til loven er der desuden etableret et fagligt visitationsnævn, der skal udarbejde retningslinjer vedrørende visitation til behandling af patienter i udlandet.

**FINLAND:** Ordningen for tilskud til lægemidler er blevet revideret. Egenbetalingen per indkøb falder bort for de lægemidler der er omfattet grundtilskuddet og det lavere specialtilskud. For lægemidler i den højere specialtilskuds-klasse betaler den forsikrede en selvrisiko på 3 EUR for hver præparat der købes på en gang.

Lægemedeltilskuddet beregnes som en procentandel af lægemiddeludgifterne. Grundtilskuddet er 42 procent (mod tidligere 50 procent) den lavere specialtilskud 72 procent (tidligere 75 procent) og den højere særlige tilskud 100 procent (som er uforandret).

Der skal betales en selvrisiko på 1,50 EUR for alle lægemidler, når selvrisikobeløbet, det vil sige udgiftsloftet, er overskredet. Hidtil har lægemidlerne været

now, pharmaceutical products have been free when the maximum amount was reached. The annual maximum amount is EUR 616.72 (EUR 606.95 in 2005), but if the maximum amount is exceeded an extra subsidy can be paid if the costs exceed EUR 16.82.

The fixed price for pharmaceutical products was reduced by 5 per cent from 1 January 2006.

Community health work has been strengthened through a change in the Public Health Act. The municipalities now have a duty to monitor the health status of the population in the municipality and to ensure that aspects of public health are taken into account by all municipal bodies. This does not apply to Åland.

The Finnish National Public Health Institute, the National Institute for Occupational Health and the Radiation and Nuclear Safety Authority, together with the National Research and Development Centre for Welfare and Health (STAKES) contribute to public health work. In addition, the possibilities for regional cooperation have been strengthened in issues relating to the local environment and supervision of health services.

**ICELAND:** A new medicinal database has been established to monitor the sale and consumption of prescription drugs. This database is a joint effort of the Icelandic Ministry of Health, the Directorate of Health, the State Social Security Institute and the Icelandic Medicines Control Agency. The Directorate of Health is responsible for the database, which will mainly be used to identify why drugs are prescribed, to measure the use of certain drugs and especially to monitor the pre-

uden egenbetaling når udgiftsloftet er nået. Det årlige udgiftsloft er 616,72 EUR (mod 606,95 EUR i 2005) men hvis loftet overskrides forudsættes der ikke udgifter på et beløb på 16,82 EUR inden der kan udbetales et tillægstilskud.

Den fastsatte partipris for lægemiddelspræparatet sænkes med 5 procent fra den 1. januar 2006.

Desuden styrkes folkesundhedsarbejdet, gennem en ændring af folkesundhedsloven. Kommunerne pålægges at følge med i sundhedstilstanden hos borgerne i kommunerne og sørge for at sundhedsaspekterne beagtes i alle kommunale virksomheder. Dette gælder dog ikke Åland.

Folkhälsoinstitutet, Arbetshälsoinstitutet og Strålsäkerhetscentralen er ved siden af Stakes sagkyndige medvirkende ved folkesundhedsarbejdet. Desuden forbedres mulighederne for et regionalt samarbejde i spørgsmål om de lokale miljø og sundhedstilsyn.

**ISLAND:** Der er etableret en ny database en der skal overvåge medicinudskrivningen og forbruget. Databasen er en fælles indsats for såvel Sundhedsministeriet, Sundhedsdirektoratet; Institutet for Social Tryghed og Det islandske Agentur for Godkendelse af Lægemidler. Det er sundhedsdirektoratet der er ansvarlig for databasen der skal anvendes til at identificere formålet med receptudskrivningen, måle brugen af visse præparater, og især overvåge udskrivningen af

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scribing of drugs that can be addictive. The database is operated in accordance with the Medicinal Products Act and the Act on the Protection of Privacy.

From 1 October 2005 medicines containing codein, which used to be available over the counter, can only be obtained with a prescription. One of the main reasons for this decision is an attempt to stem the abuse of such medicines.

A decision has been made by the Icelandic Government to build a new acute care hospital in Reykjavik. This hospital building, which will house the National University Hospital, will be located in the centre of Reykjavik, close to the University of Iceland. Construction will begin in 2009 and be completed in 2018.

A new act was passed in 2005 in order to recognize the work of healers, i.e. people who are qualified to provide non-conventional health-related treatment. According to this act, qualified healers can be registered by an umbrella organization representing alternative therapists.

The title of medical laboratory technician has been changed to biomedical scientist, according to a change in the act passed in 2005. This change has been made in order to reflect the increased educational requirements for the job, i.e. a university degree, as well as the change in scope of the work. According to the change in the act biomedical scientists are no longer required to work under the direction of a medical specialist.

præparater der er vanedannende. Databasen drives i overensstemmelse med loven om lægemidler og med loven om personbeskyttelse.

Siden 1. oktober 2005 kan medicin, der indeholder codein, kun fås på recept. Tidligere var det håndkøbsmedicin. Et af formålet med dette er at dæmme op for misbrug for disse præparater.

Den islandske regering har besluttet at bygge et nyt akutsygehus i Reykjavik. Hospitalet der skal være Islands universitetshospital, er placeret centralt i Reykjavik, tæt ved universitetet. Opførselen vil starte i 2009 og forventes afsluttet i 2018.

Der er vedtaget en ny lov for "healers" der skal identificere arbejdsområdet der er kvalificeret til at tilbyde ikke konventionel behandling. Ifølge loven har de alternative behandlere mulighed for at blive optaget i en paraply organisation der repræsenterer alternative behandlere.

Titlen på laboratorieteknikere er ændret til videnskabelige biomediciner i overensstemmelse med loven der blev vedtaget i 2005. Ændringen blev foretaget for bedre at reflektere over de større uddannelseskrav der er for personer med en universitetsuddannelse, samt indholdet i deres arbejde. Efter lovændringerne behøver biomedicinerne ikke længer at arbejde under en lægelig specialist.

In May 2005 the Icelandic Government was acquitted of a charge brought by two international tobacco companies, which challenged a clause in the Tobacco Control Act of 2002. This act bans all forms of advertising of tobacco and smoking accessories in Iceland and stipulates that tobacco and tobacco trademarks shall be placed in sales outlets so that they are not visible to the customer. The District Court of Reykjavik came to the conclusion that the clause neither violates the Icelandic Constitution nor the European Convention on Human Rights.

**NORWAY:** During 2005 no new acts or changes to acts in the field of health came into force. No changes to the organization of health services were made.

**SWEDEN:** From 1 November 2005 a national treatment guarantee was introduced. This means that the county councils shall offer health care within 90 days after a physician has decided on treatment. The guarantee applies to all planned treatment.

From 1 January 2006 new rules for management of publically financed hospitals came into force. The county councils shall manage at least one hospital themselves, and responsibility for managing regional hospitals and regional clinics cannot be delegated to others.

A new classification of medical specialists has been made, that came into force on 1 July 2006. Also, from March 2006 an advisory body has been appointed by the National Board of Health and Welfare: the National Council for Specialist Services.

I maj 2005 blev den islandske regering frikendt for en erstatning til to tobakskompagnier der klagede over tobakskontrolloven af 2002. Denne lov forbyder at reklamation for tobaks og rygetilbehør, og fastslår at al tobaksreklamation skal være placeret således at det ikke er synligt for kunderne. Distriktsretten i Reykjavik kom til den konklusion at det hverken stred mod islandsk ret eller den europæiske konvention om menneskerettigheder.

**NORGE:** Der blev i løbet af 2005 ikke vedtaget nye love eller ændringer i love på sundhedsområdet og der blev heller ikke foretaget organisatoriske ændringer.

**SVERIGE:** Der er indført en national behandlingsgaranti fra den 1. november 2005. Behandlingsgarantien indebærer at landstingene skal tilbyde behandling indenfor 90 dage efter at lægen har taget beslutning om behandling. Garantien gælder al planlagt behandling

Fra og med 1. januar 2006 gælder der nye regler for driften af offentligt finansierede sygehuse. Landstingene skal drive mindst et sygehus i eget regi, og der må ikke overlades andre at drive regionsygehuse eller regionsklinikker.

Der er taget beslutning om en ny inddeling af lægespecialer, som træder i kraft den 1. juli 2006. Desuden nedsættes der i Socialstyrelsen et rådgivende organ fra og med marts 2006, som benævnes *Nationella rådet för specialisttjänstgöring*.

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The “Responsibility Committee” that has worked since 2003 shall investigate whether the current social organizations are able to meet their obligations regarding public welfare, and shall propose structural changes and redistribution of tasks. With regard to the health sector, this relates to the structure and distribution of tasks between the state, the county councils and the municipalities. The Committee shall present its recommendations in February 2007.

The proposed “Act relating to genetic integrity” was presented to the Swedish Parliament in January 2006.

A proposal for national treatment is being dealt with by the Swedish Parliament during the spring of 2006, and a new act will come into force from 2007. National treatment is highly specialized treatment which covers the whole country.

An investigation of “new subsidies for dental treatment for adults” has been initiated. The aim is that normal dental visits shall be cheaper and that everyone shall be insured against very high expenses.

In January 2006, the Swedish Parliament was presented with a proposal for changes to the legislation relating to pharmaceutical products. Among other things, a ban on advertising prescription medicines for the public is proposed. Another proposal is that so-called herbal medicines should be registered as pharmaceutical products.

Swedish Association of Local Authorities and Regions and the National Board of Health and Welfare have agreed to cooperate with publication of easily available and clear comparisons of the quality and effectiveness of treatment. A national strategy has been developed for this.

Ansvarskomiteen, der har arbejdet siden 2003, skal undersøge den nuværende samfundsorganisations forudsætninger for at klare det offentliges velfærdsforpligtigelser og desuden foreslå forandringer af strukturen og arbejdsfordelingen. Når det gælder sundhedssektoren drejer det sig om strukturen og arbejdsfordelingen mellem staten, landstingene og kommunerne. Komiteen skal fremlægge sit forslag i februar 2007.

Forslaget ”*lov om genetisk integritet*” blev overdraget til rigsdagen i januar 2006, og trådte i kraft 1. juli 2006.

Et forslag om landsdækkende behandling er blevet behandlet i rigsdagen i løbet af foråret 2006 og der kommer en ny lov gældende fra 2007 Landsdækkende behandling, er den højt specialiserede behandling med hele landet som optagelsesområde.

Der er iværksat en udredning om ”*ny støtte til tandbehandling for voksne*” Målet er at et normalt besøg skal blive billigere, og at alle sikres mod meget høje udgifter.

I januar 2006 fik rigsdagen overdraget et forslag om ændringer i lægemiddellovgivning. Heri foreslås blandt andet forbud mod at markedsføre receptpligtige lægemidler til borgerne, samt at de såkaldte naturlægemidler bliver registreret som lægemidler.

Sveriges Kommuner og Landsting og Socialstyrelsen er blevet enige om et samarbejde vedrørende publicering af lettilgængelige og overskuelige sammenligninger af sygdomsbehandlingens kvalitet og effektivitet, og der er lagt en national strategi for dette.

## 1.2 Organization and responsibility for the health sector

**DENMARK:** Responsibility for the health service is very decentralized. The main principles are as follows: The State is responsible for legislation, supervision and guidelines. County authorities are responsible for the hospital service, health insurance and special nursing homes. Municipalities are responsible for health care, home nursing, nursing homes and child and school health care.

County authorities and municipalities have operational responsibility for health services.

In the event of ordinary illness, the use of the health service by citizens is based on a century-long tradition of family doctors. The formal rules have been drawn up in accordance with the health insurance scheme, so that primary contact is always, in principle, with the general medical practitioner. One can only use the hospital service as an alternative in cases of emergency.

Likewise, consultations with dentists are made with private dental practitioners. The public dental services only provide some dental care services for children.

Health care during pregnancy is the responsibility of the county authorities. All pregnant women are offered regular examinations according to need, with a general medical practitioner, a specialist or a midwife.

Child health care is provided according to the Act relating to health visitors, and is

## 1.2 Organisering og ansvar for sundhedsvirksomheden

**DANMARK:** Ansvaret for sundhedsvæsenet er bygget op over en meget decentral organisation. Hovedprincipperne er følgende: Staten er ansvarlig for lovgivning, tilsyn og retningslinier; amterne for sygehusvæsen, sygesikring og specielle plejehjem, mens kommunerne er ansvarlige for sundhedspleje, hjemmepleje, plejehjem samt børne- og skolesundhedstjeneste.

Driftsansvaret påhviler amter og kommuner.

Ved almindelig sygdom er borgernes benyttelse af sundhedsvæsenet baseret på en århundredlang tradition for familielæger. De formelle regler er udformet i overensstemmelse hermed i sygeforsikringsloven, således at primærkontakten altid principielt rettes til den alment praktiserende læge. Kun i skadestilfælde kan man som alternativ henvende sig til sygehusene.

På samme måde foregår konsultationer med tandlæger hos privatpraktiserende tandlæger. Servicen er kun et offentligt anliggende inden for visse dele af børnetandplejen.

Svangerskabshygien tilrettelægges under amternes ansvar. Alle gravide tilbydes efter behov regelmæssige undersøgelser hos en alment praktiserende læge, speciallæge og jordemoder.

Børnesundhedsplejen, der gives i henhold til loven om sundhedsplejerskeord-

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organized by the health administration of the municipalities. Health examinations of children are carried out by general medical practitioners who have a contract with the health insurance scheme.

Home-nursing care is also provided by the municipalities. Care is provided free of charge, following referral from a physician.

Immunization programmes are laid down by the Ministry of the Interior and Health and are implemented by general medical practitioners, for example during health examinations of children.

Advice concerning family planning is also provided, as every person or family is entitled to receive advice on questions of family planning. Advice is given either by a general medical practitioner or by a special department (usually outpatient clinic). Midwives and health visitors may also, within their range of competence, advise families. As a general rule, contraceptive products are not subsidized.

School and occupational health services are regulated by legislation. Municipalities are responsible for school health services, which are provided by health visitors and physicians. Occupational health services are organized by companies and are led by committees with representatives for both employees and employers.

As a main rule, patients may contact general medical practitioners, dentists, emergency wards and emergency and ambulance services without referral.

The hospital service is placed organizationally under the counties and the Joint Metropolitan Hospital Service. The county authorities and the management of the Joint Metropolitan Hospital Service are the re-

ninger, er knyttet til kommunernes sundhedsforvaltning, mens helbredsundersøgelser af børn udføres af de alment praktiserende læger efter overenskomst med sygesikringen.

Hjemmesygeplejerskeordningerne er ligeledes knyttet til kommunerne, der yder vederlagsfri pleje efter lægehenvisninger.

Vaccinationsprogrammerne fastlægges af Indenrigs- og sundhedsministeriet og udføres af de praktiserende læger, fx i forbindelse med helbredsundersøgelser af børn.

Der ydes også rådgivning vedrørende familieplanlægning, idet enhver person eller familie har ret til rådgivning i familieplanlægningsspørgsmål. Rådgivningen gives enten af den praktiserende læge eller af en specialafdeling (særligt ambulatorium). Også jordemødre og sundhedsplejersker kan rådgive familier inden for deres kompetenceområde. Der gives som hovedregel ikke offentlige tilskud til præventionsmidler.

Skole- og bedriftssundhedstjenesten er reguleret ved lov. Kommunerne har ansvaret for skolesundhedstjenesten, som varetages af sundhedsplejersker og læger. Bedriftssundhedstjenesten er tilrettelagt i virksomhedsregi og ledes af udvalg med repræsentanter for både arbejdstagere og arbejdsgivere.

Som hovedregel kan patienter henvende sig uden henvisning til alment praktiserende læger, tandlæger, skadestuer samt lægevagten og ambulancetjenesten.

Sygehusvæsenet hører organisatorisk under amterne og Hovedstadens Sygehusfællesskab, og det er amtsrådene og bestyrelsen for Hovedstadens Sygehusfællesskab, der er den ansvarlige myndig-

sponsible authorities. The counties own most of the hospitals. The hospitals in the City of Copenhagen and Frederiksberg municipality and Rigshospitalet have been merged into the Joint Metropolitan Hospital Service. A few private hospitals have a contract with the county in which they are located, and a few small private hospitals operate totally independently of the public hospital service.

Specialist hospitals are not organized separately. There are no health centres or similar institutions with hospital beds in Denmark.

As a rule, patients have free choice of hospital where they wish to receive treatment. If the waiting list for treatment at a public hospital is more than two months, the patient can, according to the so-called extended free choice arrangement, choose to receive treatment at a private hospital or a hospital abroad that has a contract with the county in which the patient is resident. Certain types of treatment are exempt from this arrangement, such as organ transplantation, sterilization and psychiatric treatment.

Most practising specialist physicians work according to an agreement with the health insurance scheme and most of their patients are referred from general medical practitioners. There are, however, certain exceptions to this rule, such as practising eye and ear specialists.

Ordinary nursing homes are run by the municipalities, but there are many private (independent) nursing homes, which receive residents according to a contract with the municipality where they are located. Certain specialized nursing homes are run by the counties, for example psychiatric nursing homes.

Amterne ejer de fleste af sygehuse-  
ne. Sygehusene i København og Frederiksberg kommuner samt Rigshospitalet, er samlet i Hovedstadens Sygehusfællesskab. Der er enkelte private sygehuse, som har en fast benyttelsesaftale med det amt hvori de ligger, mens nogle få mindre, private sygehuse fungerer helt uafhængigt af det offentlige sygehusvæsen.

Specialsygehusene er ikke særskilt organiseret. Der findes ingen sundhedscentre eller lignende institutioner med sengepladser i Danmark.

Patienterne har som regel frit valg med hensyn til hvilket sygehus, de ønsker behandling på. Er ventetiden på behandling på de offentlige sygehuse mere end 2 måneder, kan patienten, efter den såkaldte udvidede fritvalgsordning, vælge at blive behandlet ved et af de private eller udenlandske sygehuse der har indgået aftale med bopælsamtet. Visse behandlinger er undtaget fra den udvidede fritvalgsordning, som eksempelvis organtransplantation, sterilisation og psykiatrisk behandling.

Praktiserende speciallæger arbejder for flertallets vedkommende efter aftale med sygesikringen og modtager de fleste af deres patienter efter henvisning fra alment praktiserende læger. Der er dog visse undtagelser fra denne regel. Det gælder fx øjen- og ørespecialerne i praksissektoren.

De almindelige plejehjem drives af kommunerne, men der eksisterer et betydeligt antal private (selvejende) plejehjem, der modtager beboere i henhold til aftaler indgået med beliggenhedskommunerne. Visse specialplejehjem drives af amterne. Det gælder fx psykiatriske plejehjem.

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Pharmacies are organized as private companies, but are also subject to government regulation. The state regulates the number and the geographical location of pharmacies, their tasks, and the profit margin on pharmaceutical products.

**FAROE ISLANDS:** The Faroe Islands' home rule determines the rules concerning the tasks of the health service, benefits and administration. The hospital structure and its organization, specialist fields and their organization, and the primary health service and its organization largely follow the Danish system. The same applies to nursing homes, home nurses and home helps, and dental treatment.

The Danish Act relating to central administration of health care also applies to the Faroe Islands. The Danish Act concerning medical officers etc. from 1973 still applies to the Faroe Islands.

The hospital services are run by the home government of the Faroe Islands, which is responsible for all expenses related to running costs and property.

All practising physicians are public employees, but they are mainly remunerated by the public health benefit scheme. Physician services are administered both by the municipal authorities and the state authorities.

Midwifery services are organized under the hospital services.

Physiotherapy services are provided by the hospital services and by privately practising physiotherapists. Pharmacies are run by public authorities.

Apotekerne er organiseret som liberalt erhverv, men er undergivet en indgående statslig regulering. Staten regulerer antallet og placeringen af apoteker, deres opgaver samt avancen på lægemidler i apotekerleddet.

**FÆRØERNE:** Færøernes hjemmestyre fastsætter regler om sundhedsvæsenets opgaver, ydelser og administration. Hospitalsstrukturen og organisationen, speciallægeordninger og deres organisation samt det primære sundhedsvæsen og dets organisation følger i alt væsentligt danske forhold. Det samme gør sig gældende for plejehjem, hjemmesygepleje og hjemmehjælp samt tandbehandling.

Den danske lov om sundhedsvæsenets centrale styrelse er også gældende for Færøerne. Den danske lov om embedslægeinstitutioner fra 1973 gælder fortsat på Færøerne.

Sygehusvæsenet bliver drevet af Færøernes Landsstyrelse, som afholder alle udgifter til drift og anlæg.

De praktiserende læger er alle offentligt ansat, men bliver hovedsageligt aflønnet pr. ydelse fra de offentlige sygekasser. De praktiserende læger bliver administreret af både de kommunale myndigheder og af landsmyndighederne.

Jordemoderordningerne er organiseret under sygehusvæsenet.

Fysioterapi foregår både i det offentlige sygehusvæsen og hos privatpraktiserende fysioterapeuter. Apotekervæsenet er drevet af det offentlige.

**GREENLAND:** The most important legislation includes three acts: a) the Act concerning management and organization of health services, b) the Patient's Rights Act and c) the Health Services Act.

Health services are supervised by an independent chief medical officer, who gives advice and guidance, carries out supervision, collects medical statistics and deals with complaints.

Health services are organized in 16 health districts, each with a health centre, where primary health services and preventive measures are provided. Other types of examination, for example blood tests and radiographs, can be carried out. Acute operations can be performed and inpatient services can be provided. If necessary, or in complicated cases, patients can be sent to Dr. Ingrid's Hospital in Nuuk or to a hospital in Denmark, or from the east coast of Greenland to Iceland.

It is becoming increasingly difficult to recruit and keep authorized health care personnel. Too few health care personnel are educated in Greenland. There are therefore plans to reorganize health services, with fewer local hospitals, regionalization of hospitals, increased utilization of nurses in providing treatment, use of telemedicine etc.

In providing health services to villages and trading stations, there are serious problems with transport and there are too few health care personnel. As a result, the quality of the health services is too low.

The large municipalities have established health visitor and home nursing services, and district psychiatric services. The municipal social administration provides services for elderly people and disabled

**GRØNLAND:** Den vigtigste lovgivning er tre landstingsforordninger a) om sundhedsvæsenets styrelse og organisation, b) om patienters retsstilling og c) om sundhedsvæsenets ydelser.

Sundhedsvæsenet er under tilsyn af en uafhængig embedslægeinstitution som yder rådgivning, vejledning og kontrol samt forestår indsamling af medicinalstatistiske indberetninger og behandler klagesager.

Sundhedsvæsenet er organiseret i 16 sundhedsdistrikter, hver med et sundhedscenter, som forestår den primære og forebyggende sundhedsindsats. Der findes mulighed for supplerende undersøgelser, eksempelvis blod- og røntgenundersøgelser, der kan foretages akutte operationer og ydes døgnpleje til indlagte patienter. Ved behov og komplicerede forløb visiteres til Dr. Ingrid's Hospital i Nuuk eller til sygehus i Danmark, fra østkysten evt. til Island.

Der er tiltagende vanskeligheder med at rekruttere og fastholde autoriseret sundhedspersonale. Der uddannes for lidt autoriseret sundhedspersonale i Grønland. Derfor arbejdes med planer om omorganisering af sundhedsvæsenet med færre lokale sygehuse, regionalisering af sygehuse, mere inddragelse af sygeplejersker i behandling, anvendelse af telemedicin etc.

Ved betjening af bygder og udsteder er der store problemer med transport, personalsituationen er ringe, hvorfor kvaliteten af sundhedsydelser er for lav.

De større kommuner har udbygget sundheds- og hjemmesygepleje samt distriktpsychiatriske tilbud. Kommunernes socialforvaltninger forestår tilbud til ældre og funktionshæmmede, eksempelvis

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people, such as nursing homes, home helps and aids for disabled people.

In each health district, dentists and dental surgery assistants provide dental care. All school children receive preventive dental care.

There are no pharmacies in Greenland. Pharmaceutical products are free and are dispensed by the health services. There is a small selection of over-the-counter medicines.

There are no occupational health services in Greenland.

**FINLAND:** Municipalities have responsibility for health services. The responsibility of municipalities is laid down in the Public Health Act (1972), in the Specialist Treatment of Diseases Act (1989), and in the Treatment of the Mentally Ill Act (1990).

In the Public Health Act and its statutes, the tasks of the municipal public health services are listed. Here it is stated that municipalities are responsible for:

- Guidance and preventive health care, including children's health, health education, advice concerning contraceptive measures, and health surveys and screening.
- Medical treatment, including examination and care, medical rehabilitation and first aid. General medical treatment is provided in health centres, in inpatient departments or as home nursing care.

tilbud om plejehjem, hjemmehjælp og hjælpemidler.

I hvert sundhedsdistrikt ydes tandpleje ved tandlæger og tandklinikassistenter. Alle skolebørn ydes forebyggende tandpleje.

Der er ikke apotekervæsen i Grønland. Medicin er gratis og udleveres fra det behandlende sundhedsvæsen. Der findes et lille udbud af håndkøbsmedicin.

Der er ikke indført BST – bedriftssundhedstjeneste i Grønland.

**FINLAND:** Det er kommunerne, der har ansvaret for sundhedsvæsenet. Kommunernes ansvar for sundhedsvæsenet er fastsat i *Folkhälsolagen* (1972), i *Lag om specialiserad sjukvård* (1989) og i *Mentalvårdslagen* (1990).

I *Folkhälsolagen* og dennes forordninger opregnes de arbejdsopgaver, der hører under det kommunale folkesundhedsarbejde. Heri fastsættes det, at kommunerne har ansvaret for:

- Rådgivning og sundhedsforebyggelse, som omfatter børns sundhed, oplysningsarbejde, rådgivning angående svangerskabsforebyggelse, sundhedsundersøgelser og screening.
- Sygdomsbehandling som omfatter lægeundersøgelser og pleje samt medicinsk rehabilitering og førstehjælp. Den almindelige sygdomsbehandling gives ved sundhedscentre, på sengeafdelinger eller som hjemmesygepleje.

From March 2005, with the exception of cases of injury, patients shall be examined and treated within a given time. Patients shall be able to obtain immediate contact with a health centre on weekdays in normal working time, and shall also be able to visit the health centre. If an appointment at the health centre it is deemed to be necessary, the patient shall be given an appointment within three working days from the time of contact with the health centre. Normally, treatment is provided at the health centre immediately at the first visit. Treatment that is not provided at the visit shall be started within three months. In cases where health centres provide specialized treatment, the same time-limits apply as those for specialized health services (6 months).

Need for treatment, with the exception of cases of injury, shall be assessed within three weeks after referral to a hospital. If a doctor has examined a patient, and has established that treatment is needed, the treatment shall be started at the latest within six months.

Children and young people shall receive psychiatric treatment within three months if it assessed to be necessary.

Dental treatment that is assessed to be necessary, shall be started within a reasonable time, and at the latest within six months.

If a patient's own health centre or hospital cannot provide treatment within the given time, the patient shall be offered treatment either in another municipality or at a private institution, without extra cost to the patient.

Fra og med marts 2005 skal en patient, med undtagelse af skader, undersøges og behandles indenfor en fastsat tid. Patienten skal umiddelbart få kontakt med sundhedscentret, på hverdage i arbejdstiden, ligesom patienten også skal kunne besøge sundhedscentret. Hvis det bedømmes at der er behov for et besøg på sundhedscentret, skal patienten have en tid på sundhedscentret indenfor tre hverdage fra det tidspunkt patienten har taget kontakt. Normalt indledes behandlingen ved sundhedscentret med det samme ved det første besøg. Behandling der ikke gives ved besøg skal iværksættes inden tre måneder. I de tilfælde hvor sundhedscentre yder specialiseret behandling, tillempes de samme tidsgrænser som indenfor den specialiserede behandling (der er seks måneder).

Behovet for behandling, i de tilfælde der ikke drejer sig om skader, skal bedømmes indenfor 3 uger efter henvisning til et sygehus. Hvis en læge der har undersøgt en patient, konstaterer at vedkommende har behov for behandling, skal denne indledes senest indenfor seks måneder.

Børn og unge skal modtage psykiatrisk behandling indenfor 3 måneder hvis det skønnes nødvendig.

Tandbehandling, som anses for at være nødvendig, skal iværksættes indenfor en rimelig tid, og senest indenfor 6 måneder.

Hvis patientens egen sundhedscenter eller sygehus ikke kan behandle patienten, indenfor den fastsatte tid, skal behandlingen tilbydes enten i en anden kommune eller indenfor den private sygdomsbehandling, uden ekstra udgifter for patienten.

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The municipalities must provide services for people who are mentally ill that can reasonably be offered in health centres.

Dental care includes information and prevention, and dental examination and treatment. Dental examination and treatment paid by the health insurance is provided for the whole population. Dental care is also provided in health centres for adults, particularly in rural municipalities. Most dental treatment for adults is provided by dentists in private practice. Young people under the age of 18 are entitled to dental care free of charge.

Municipalities are also required to provide ambulance services and to ensure that occupational health services are established. Employers can either organize their occupational health service themselves or they can have an agreement with a health centre or with others who provide occupational health services.

In many municipalities, social welfare and health services have been integrated in recent years.

Physicians working in health centres are usually specialists in general medical care. In the public health service system, patients need a referral for specialist treatment, except in the case of emergency. In private clinics, the physicians are mostly specialists. Patients need no referral to visit these private specialists. Physicians working in private clinics can refer their patients either to public or private hospitals.

Specialized central and regional hospitals are run by groups of municipalities. Within mental health care, more and

Kommunerne skal sørge for, at mentalt syge får ydelser, som med rimelighed kan tilbydes i sundhedscentre.

Tandbehandlingen omfatter oplysning og forebyggelse samt undersøgelse og behandling af tænder. Undersøgelse og behandling af tænder betalt af sygeforsikringen gives til hele befolkningen. Ved sundhedscentre, især i landkommunerne, gives der desuden tandbehandling til voksne. Det meste af voksenbehandlingen udføres af privatpraktiserende tandlæger. Unge under 18 år har ret til tandbehandling uden brugerbetaling.

Kommunerne skal desuden tilvejebringe sygetransport og sørge for etableringen af bedriftssundhedstjenester. Arbejdsgiverne kan selv organisere bedriftssundhedstjenesten, eller de kan indgå aftale med et sundhedscenter eller andre der arbejder med bedriftssundhedstjenesten.

I mange kommuner er den sociale service i de senere år blevet integreret med sundhedsydelserne.

Læger, der arbejder ved sundhedscentre, er normalt alment praktiserende specialister. I det offentlige sundhedssystem skal patienterne have en henvisning til en specialist, dog ikke i akutte tilfælde. De fleste af de læger som arbejder i private klinikker er specialister. Patienterne behøver ingen henvisning for at opsøge disse specialister. Læger der arbejder i privatklinikker kan henvise patienter til enten private eller offentlige hospitaler.

De specialiserede centrale og regionale hospitaler styres af en sammenslutning af kommuner. Inden for den psykiatriske

more emphasis is placed on outpatient treatment, and the use of institutions is decreasing.

Municipalities are responsible for providing health and social services for elderly people. These services include measures to make it possible for elderly people to continue to live in their own homes, for example home help services and home nursing services, day care services and sheltered housing (mainly social services). In the health care sector, support for people to live in their own homes is provided through home nursing services, short-term and periodic stays and treatment in nursing homes, and day care in hospitals. Health services for elderly people also include primary medical care, prevention and rehabilitation. Long-term treatment and residential care for elderly people is provided in old people's homes and nursing homes.

Pharmacies are private, but under state supervision. Prescription drugs and over-the-counter drugs can only be sold by pharmacies.

**ÅLAND:** According to the home rule for Åland, Åland has its own legislation for the health sector except for administrative interventions regarding personal freedom, contagious diseases, sterilisation, induced abortion, assisted reproduction, forensic medicine, and regulations for companies offering health services.

The tasks, structure and organization of the public health sector are regulated according to the Act for the Health Sector (1993). This Act is a general act that can be supplemented by public decree. Detailed rules concerning the sector are described annually in a sector

behandling bliver der lagt større og større vægt på ambulant behandling og brugen af institutioner er således faldende.

Kommunerne har ansvaret for social- og sundhedsydelserne til de ældre. Dette indbefatter ydelser det gør det muligt for de ældre at blive boende i eget hjem ved for eksempel hjemmehjælp og hjemmepleje, dagpleje og beskyttede boliger (hovedsagelig social service). For sundhedssektoren bliver personer støttet i at blive boende hjemme, med hjemmepleje, korttidsophold eller periodevis ophold/behandling på et sygehjem eller dagophold på et hospital. Servicen til de ældre inkluderer også den almindelig lægebehandling forebyggelse og revalidering. Langtidsbehandling/ophold for ældre findes ved alderdomshjem og plejecentre.

Apoteker er privatejede, men under statsligt tilsyn. Det er kun apotekerne der kan forhandle såvel receptpligtig medicin som håndkøbsmedicin.

**ÅLAND:** På grund af sit selvstyre har Åland sin egen lovgivning for sundhedsvæsenet, dog med undtagelse af bl.a. administrative indgreb i den personlige frihed, smitsomme sygdomme, kastrering og sterilisation, svangerskabsafbrydelse, kunstig befrugtning, retsmedicinske undersøgelser, samt regelsættene for virksomheder der udbyder sundhedsydelser.

Det offentlige sundhedsvæsens forpligtigelser, struktur og organisation reguleres i landskabsloven om sundhedsvæsenet (Lagen om hälso- och sjukvården 1993). Loven er en rammelov, som efter behov kan suppleres med bekendtgørelser. Detaljerede bestemmelser om virksomheden

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plan. Issues that do not fall under the Åland legislation, or that are not regulated by separate legislation, follow Finnish legislation.

The whole public health service comes under an overall organization called Åland's Health Care Organization (ÅHS). The organization is governed by a politically elected board.

The Åland Government has overall responsibility for ensuring that the population receives necessary medical care. The role of the municipalities is limited to financing certain defined types of treatment. Primary health services and specialized health services are both part of the ÅHS.

Services that cannot be provided locally are bought from Finland and Sweden, either from private practitioners, private institutions or university hospitals.

The Åland hospitals are specialized institutions that provide both outpatient and inpatient treatment.

Specialized treatment outside the hospitals is provided in the form of consultative support for primary health care and for private general medical practitioners.

The structure of primary health care corresponds functionally and ideologically to the Finnish public health care system. Advice concerning contraception and counselling for mothers and infants, and school health services, function as in Finland. Immunization programmes are voluntary and the recommendations are as in Finland. Physiotherapy under the

beskrives hvert år i en virksomhedsplan. Forhold som ikke hører under ålandsk lovgivning, eller som ikke har egen lovgivning, tilpasses finsk lovgivning.

Hele det offentlige sundhedsvæsen, er underordnet en samlet organisation, Ålands hälso- och sjukvård (ÅHS). Organisationen ledes af en politisk valgt styrelse.

Landskapsregeringen er hovedansvarlig og har ansvaret for at befolkningen får den nødvendige sygdomsbehandling. Kommunernes ansvar og indflydelse er begrænset til visse nærmere afgrænsede finansieringsforpligtigelser. Den primære sundhedsbehandling og den specialiserede behandling indgår i samme organisation ÅHS.

Service som ikke kan produceres af egne enheder købes af producenter i Finland og Sverige, enten hos privatpraktiserende, private institutioner eller universitets-sygehuse.

De ålandske sygehuse er specialiserede institutioner, der udfører såvel ambulant behandling og behandling af indlagte patienter.

Speciallægevirksomheden uden for sygehuse eksisterer i form af konsultativ bistand til den offentlige primære behandling og til de privatpraktiserende læger.

Det primære sundhedsvæsens struktur svarer ideologisk og driftsmæssigt til det finske folkesundhedsarbejde. Rådgivning vedrørende prævention, rådgivning til mødre og småbørn samt skolesundhedspleje, fungerer som i Finland. Vaccinationsprogrammer er frivillige, og anbefalingerne svarer til de finske. Fysioterapien inden for ÅHS er en fællesfunktion

ÅHS is a shared function both for the primary health service and the hospitals. In addition a number of private physiotherapists are used by the public sector.

Occupational health services are organized in the same way as in Finland.

With regard to dental treatment, priority is given to the youngest age groups, certain high-risk groups and preventive measures. If possible, other patient groups are also treated. The private sector is well established with a high capacity, and it provides an important supplement.

Regulations for pharmacies are the same as in Finland.

**ICELAND:** The government is responsible for health services according to the Health Service Act of 1990. Other major acts are:

- Patients' Rights Act
- Social Security Act
- Patient Insurance Act
- Communicable Diseases Act
- Physicians Act

The state employs most health care personnel and is responsible for the overall administration of health institutions.

Health centres are responsible for primary health services, including preventive services and general medical treatment. Preventive services include child health care, maternity care, school health care, immunization, family planning etc. Home nursing care is also the responsibility of the health centres.

for både primærsektoren og sygehusene. Som et supplement er der et antal private fysioterapeuter som også anvendes af det offentlige.

Bedriftssundhedstjenesten organiseres som i Finland.

Indenfor tandbehandlingen er behandling af de yngre aldersgrupper og visse risikopatientgrupper samt forebyggende foranstaltninger der har højeste prioritet. Såfremt det er muligt behandler man også andre patienter. Den private sektor er kapacitetsmæssigt veludbygget og udgør et vigtigt supplement.

Reglerne for apotekervæsenet er det samme som i Finland.

**ISLAND:** Regeringen har ansvaret for sundhedsvæsenet i henhold til sundhedsloven fra 1990. De andre vigtigste love er følgende:

- Lov om patientrettigheder
- Lov om social tryghed
- Lov om patientforsikringer
- Lov om smitsomme sygdomme
- Lægeloven

Størsteparten af sundhedspersonalet er ansat af staten der har det administrative ansvar for institutioner indenfor sundhedsvæsenet.

Sundhedscentrene har ansvaret for det primære sundhedsvæsen som både omfatter forebyggelse og almen sygdomsbehandling. Det forebyggende arbejde omfatter småbørn, mødre, skolesundhedsordninger, vaccinationer, familieplanlægning m.v. Hjemmesygeplejen hører også til sundhedscentrenes ansvarsområde.

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In Reykjavík there are a few private general practitioners who work in private practice and provide medical treatment under a contract with the State Social Security Institute (SSI).

Specialist treatment is provided in the more densely populated areas, largely by private medical specialists, who work under a contract with the SSI. Specialists also make visits to health centres in the less densely populated areas. Outpatient specialist services are also provided by the hospitals. No referral is required for specialist treatment.

There are three types of hospitals: 1) highly specialized hospitals, one in Reykjavík and one in Akureyri, 2) regional hospitals with a certain degree of specialization, and 3) local hospitals. Many local hospitals also function as old people's homes and nursing homes. Other health institutions include rehabilitation hospitals and clinics for substance abusers.

Physiotherapy is partly provided in health centres, but mostly by privately practising physiotherapists in the urban areas. Physiotherapists in private practice work under a contract with the SSI.

The health centres provide home nursing services, whereas home help services are part of the municipal social service system.

Many nursing homes and old people's homes are run as independent institutions. They are run by municipalities, voluntary organizations etc. They are partly financed by user charges, but the major part of financing is provided by the government, either through the national pen-

I Reykjavík findes der nogle få private alment praktiserende læger der tilbyder behandling, og som arbejder efter kontrakt med Rigsforsikringen.

Speciallægebehandling findes i de mest tætbefolkede områder og udbydes i stort omfang af privatpraktiserende speciallæger der arbejder efter overenskomst med Rigsforsikringen. I mindre tætbefolkede områder besøger specialisterne også sundhedscentre. Der tilbydes også speciallægebehandling fra ambulatorierne ved hospitalerne. Det er ikke påkrævet med en henvisning til speciallægebehandlingen.

Der er tre typer sygehuse: 1) højt specialiserede sygehuse, hvoraf et findes i Reykjavík og et i Akureyri, 2) regionale sygehuse med en vis specialisering og 3) et antal lokale sygehuse. De lokale sygehuse fungerer for det meste også som alderdoms- og sygehjem. Af andre institutioner kan nævnes revalideringssygehuse og alkoholklinikker.

En vis del af fysioterapien foregår gennem sundhedscentre, men det meste af behandlingen varetages af privatpraktiserende fysioterapeuter i byområderne. Privatpraktiserende fysioterapeuter arbejder på kontrakt med Rigsforsikringen.

Hjemmesygeplejen drives fra sundhedscentre mens hjemmehjælpen gives gennem det kommunale sociale servicesystem.

De fleste pleje- og alderdomshjem fungerer som selvejende institutioner. De drives af kommuner, frivillige organisationer o.l. De finansieres delvis ved brugerbetaling; men den største del af finansieringen kommer dog fra staten, for alderdomshjemmenes vedkommende gennem

sion scheme, as is the case for old people's homes, or through the health insurance scheme, as is the case for nursing homes.

Most dental practices in Iceland are small and privately owned. Dental treatment is mainly provided by private dental practitioners.

Occupational health services are by law the responsibility of the employer. For large workplaces these services are provided by individual doctors, occupational health consultant firms or health centres.

Pharmacies are privately run.

**NORWAY:** The system of health care provision in Norway is based on a decentralized model. The state is responsible for policy design and overall capacity and quality of health care through budgeting and legislation. The state is also responsible for hospital services through state ownership of regional health authorities. Within the regional health authorities, somatic and psychiatric hospitals, and some hospital pharmacies, are organized as health trusts.

Within the limits of legislation and available economic resources, regional health authorities and the municipalities are formally free to plan and run public health services and social services as they like. However, in practice, their freedom to act independently is limited by available resources.

The municipalities have responsibility for primary health care, including both preventive and curative treatment such as:

pensionsforsikringen, for plejehjemmenes vedkommende gennem sygeforsikringen.

Tandlægeklinikker i Island er små og næsten alle tandlæger er privatpraktiserende. Tandbehandlingen udføres for det meste af privatpraktiserende tandlæger.

Bedriftssundhedstjenesten er ifølge loven arbejdsgiverens ansvar. De større arbejdspladser får denne ydelse enten fra praktiserende læger, konsulent firmaer eller sundhedscentre.

Apoteker drives af private.

**NORGE:** Udbudet af sundhedsydelser er i Norge baseret på en decentral model. Staten er ansvarlig for politiklægningen og via lovgivningen og budgetlægningen sikrer at de nødvendige ressourcer er tilstede. Staten er også ansvarlig for hospitalssektoren ved at staten ejer de regionale udbydere af hospitalsydelser (regionale helseforetak). I de regionale enheder er såvel somatiske som psykiatriske hospitaler samt enkelte hospitalsapotekere organiseret som sundhedsvirksomheder (helseforetak).

Indenfor de begrænsninger lovgivningen og de økonomiske ressourcer sætter, er de regionale udbydere og kommunerne formelt set frit stillet til at tilrettelægge udbudet af sundhedsydelser og den sociale service som de selv vil. Dog, i praksis så sætter de økonomiske ressourcer grænser for deres frihedsgrader.

Det er kommunerne som har ansvaret for det primære sundhedsvæsen, som omfatter både forebyggende og kurativ behandling med henblik på:

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- Promotion of health and prevention of illness and injuries, including organizing and running school health services, health centres, child health care provided by health visitors, midwives and physicians. Health centres offer pregnancy check-ups and provide vaccinations according to the recommended immunization programmes.
- Sundhedsfremme og forebyggelse af sygdomme og skader, herunder at organisere og drive skolesundhedsvæsenet og sundhedscentre samt børnesundhedspleje udført af sundhedsplejersker, jordemødre og læger. Sundhedscentre skal tilbyde svangerskabsopfølgning og -kontrol samt vaccinationer efter de anbefalede vaccinationsprogrammer.
- Diagnosis, treatment and rehabilitation. This includes responsibility for general medical treatment (including emergency services) physiotherapy and nursing (including health visitors and midwives).
- Diagnosticering, behandling og rehabilitering. Dette omfatter ansvaret for den almindelige lægebehandling (inkl. lægevagtordninger), fysioterapi og sygepleje (inkl. sundhedsplejersker og jordemødre).
- Nursing care in and outside institutions. Municipalities are responsible for running nursing homes, home nursing services and other services such as the home help service. The health services in and outside institutions are, to a varying degree, organized jointly within the same municipal department for treatment and care.
- Pleje og omsorg i og uden for institutionerne. Kommunerne har ansvaret for driften af sygehjemmene, hjemmesygepleje og andre ordninger (fx hjemmehjælp). Sundhedsydelserne i og uden for institutionerne er i varierende grad forankret i en fælles organisatorisk enhed i form af en fælles pleje- og omsorgsafdeling i kommunen.

In Norway there is currently a National Mental Health Programme. The programme was originally for the period 1999 to 2006, and it has been prolonged until 2008. This programme aims at improving accessibility, quality and organization of mental health services and treatment on all levels. A central idea of the Mental Health Programme is to promote deinstitutionalization, with considerable emphasis on community-based psychiatry, where treatment is given closer to the patient's local community and primary health services. These community clinics represent an all-round psychiatric practice and consist of a network of services, such as multidisciplinary treatment and teamwork, in addition to programmes for accommodation, occupation and social support.

Der findes i øjeblikket et nationalt program for psykiatrien. Programmet var oprindeligt for perioden 1999 til 2006, men er forlænget indtil 2008. Det er programmets målsætning at der gives den nødvendige adgang for psykiatrisk behandling, kvalitetssikring og udbud af behandling på alle niveauer. Det er centralt for programmet at man fremmer en deinstitutionisering af behandlingen med betydelig vægt på distriktskykiatrien, hvor behandlingen gives i tæt kontakt til patientens lokale samfund og i tilknytning til den almene lægebehandling. Disse lokalklinikker repræsenterer en bredt funderet psykiatrisk praksis og består af et netværk af udbud så som multidisciplinær behandling og teamwork sammen med programmer for bolig, beskæftigelse og social støtte.

The county authorities are responsible for providing public dental services for the following groups: 1. children and adolescents (under 21 years of age) 2. mentally handicapped adults, and 3. elderly people, disabled people, and people with chronic illnesses who live in institutions or who receive home nursing care. Dental services for the rest of the population are mainly provided by private general dental practitioners, and paid for by the patients.

There are several different ways in which occupational health services are organized. Some large companies have their own private service, organized independently. Another type of arrangement is that several companies have a joint arrangement with an occupational health services company, which sells occupational health services to the group.

Pharmacies are mainly privately owned, but are subject to strict public control.

Health services and health care personnel are regulated by current legislation. The most important acts of relevance to the health sector are the following:

- Health Personnel Act
- Patients' Rights Act
- Patient Injury Act
- Specialized Health Services Act
- Municipal Health Services Act
- Health Authorities and Health Trusts Act
- Communicable Diseases Act
- Health Services Supervision Act
- Mental Health Care Act
- Dental Health Services Act
- Tobacco Act
- Pharmacy Act
- Medicinal Products Act
- Abortion Act

Amterne (fylkene) har ansvaret for tandbehandlingen til følgende grupper; 1) børn og unge under 21 år 2) psykisk syge voksne og 3) ældre, funktionshæmmede og personer med kroniske sygdomme der lever på institutioner eller modtager hjemmesygepleje. Tandbehandling for resten af befolkningen gives hovedsageligt af privatpraktiserende tandlæger og patienterne betaler selv for behandlingen.

Bedriftssundhedstjenesten kan tilrettelægges på mange forskellige måder. Nogle af de store virksomheder organiserer deres egen bedriftssundhedstjeneste uafhængig af andre. Andre typer er, at flere virksomheder går sammen om ordningen og indgår aftale med en virksomhed der udbyder bedriftssundhedstjeneste.

Apotekerne er hovedsageligt privat drevne, men er underlagt en omfattende statslig kontrol.

Sundhedsvæsenet og sundhedspersonale reguleres af den eksisterende lovgivning. De vigtigste regelsæt med betydning for sundhedsvæsenet er:

- Helsepersonelloven
- Pasientrettighetsloven
- Pasientskadeloven
- Specialisthelsetjenesteloven
- Kommunehelsetjenesteloven
- Helseforetaksloven
- Smittevernloven
- Helsetilsynsloven
- Psykisk helsevernloven
- Tannhelsetjenesteloven
- Tobakkskadeloven
- Apotekloven
- Legemiddeloven
- Abortloven

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**SWEDEN:** The most important act is the Health and Medical Services Act. Other important acts include the Act concerning Active Health Personnel and the Act Concerning Injuries to Patients.

Primary health care is run by 18 county authorities and three regions.

Primary health services include health centres with general medical practitioners, mother and child centres, district nursing health care, district physiotherapy, home visiting and community dental services. The purpose of the primary health service is to promote public health within a geographically defined area.

School health services, home help, preventive measures and environmental health all come under the municipalities, which also have responsibility for the local nursing homes and part of the home nursing services.

The county and regional authorities still have responsibility for both outpatient and inpatient psychiatric treatment. However, within psychiatry there is also a trend towards increased collaboration with other agencies. Thus the municipalities, since 1995, have assumed greater responsibility for housing for psychiatric patients, and for general care and support.

Occupational health services are regarded as part of supervision of the work environment. The majority of physicians employed in occupational health services are linked to individual companies.

The National Board of Health and Welfare issues recommendations for immunization of children.

**SVERIGE:** Den vigtigste lov er Hälso- och sjukvårdslagen (HSL). Andre vigtige love er blandt andet Loven om erhvervsvirksomhed inden for sundhedsområdet samt Patientskadeloven.

Det primære sundhedsvæsen drives af de 18 landsting og tre regioner.

Det primære sundhedsvæsen omfatter sundhedscentre med almenmedicinske læger, børne- og mødrecentre, distriktssygepleje, distriktsfysioterapi, sygdomsbehandling i hjemmet og offentlig tandpleje. Det primære sundhedsvæsen har til opgave at arbejde for hele befolkningens sundhed inden for et afgrænset geografisk område.

Skolesundhedsvæsenet og hjemmehjælpen hører, ligesom det lokale miljø- og sygdomsforebyggende arbejde, under kommunerne, der også har ansvaret for de lokale sygehjem og en del af hjemme-sygeplejen.

Landstingene og regionerne har ligesom tidligere ansvaret for den psykiatriske behandling såvel inden for som uden for sygehusene. Også inden for psykiatrien pågår der en udvikling hen imod et større samarbejde med andre aktører. Dette har blandt andet medført at kommunerne fra og med 1995 fik et udstrakt ansvar for boligforhold samt støtte og omsorg til psykiatriske patienter.

Bedriftssundhedstjenesten betragtes som en del af arbejdstilsynet. Størstedelen af lægerne i bedriftssundhedstjenesten er tilknyttet de enkelte arbejdspladser.

Socialstyrelsen udarbejder den almindelige vejledning for vaccination af børn.

Privately produced, but publicly financed health care is provided on a limited scale. There are a few private hospitals. About 30 per cent of all medical consultations are with private medical practitioners. In addition, there are some physiotherapists who work in private practice. Half of the dentists are private practitioners. The Act concerning the fees, etc. of medical practitioners and physiotherapists in private practice lays down the conditions governing the rights of physicians and physiotherapists to practice with financial support from the county authorities.

The hospitals are run by the county and regional authorities.

The county hospitals comprise both more specialized hospitals covering the whole county and hospitals covering only part of the county. Medical treatment is provided in most areas of specialization, partly in hospital departments, partly in outpatient clinics. Psychiatric treatment, which is often divided into sectors, comes under the provincial hospital services. More complicated and specialized treatment is provided by the regional hospital service. The county and regional authorities cooperate in six treatment regions, each with at least one regional hospital.

Pharmacies are run by the state.

The Pharmaceutical Benefits Board has responsibility for deciding whether a medicine or a specific medical product shall be subsidized, and for determining the price of the product.

Privatproduceret men offentligt finansieret sygdomsbehandling udøves kun i begrænset omfang. Der findes et fåtal private sygehuse. Hen ved 30 procent af alle lægebesøg foregår hos privatpraktiserende læger. Der findes endvidere privatpraktiserende fysioterapeuter. Inden for tandplejen er halvdelen af tandlægerne privatpraktiserende. Loven om vederlag m.v. til privatpraktiserende læger og fysioterapeuter fastsætter lægers og fysioterapeuters muligheder for at praktisere med finansiering fra landstingene.

Sygehusene drives af landstingene og regionerne.

Lenssygehusene omfatter såvel mere specialiserede sygehuse, der dækker hele lenet, som sygehuse, der dækker dele af lenet. Sygdomsbehandlingen foregår inden for de fleste specialer dels ved sygeafdelinger (sluten vård), dels i ambulatorier (öppen vård). Psykiatrisk behandling, som ofte er sektoropdelt, henregnes under lenssygehusvæsenet. Mere krævende og specialiseret sygdomsbehandling foregår på de regionale sygehuse. Landstingene og regionerne samarbejder i seks behandlingsregioner, hver med mindst ét regionssygehus.

Apotekerne er statslige.

Läkemedelsförmånsnämnden (Nævnet for lægemidler) skal afgøre om der skal ydes refusion til et lægemiddel eller en bestemt vare, samt fastsætte prisen for denne.

### 1.3 Supervision of health services

**DENMARK:** Supervision of health service is based partly on legislation governing the central administration of the health service and partly on special legislation, first and foremost concerning the different groups of health care personnel (the Physicians' Act, the Nursing Act, etc.). Supervision is partly carried out by the National Board of Health and partly by medical officers.

The medical officers are employed by institutions for medical officers of which there is one in every county and one in the City of Copenhagen. These institutions are state-run and thus independent, politically and administratively, of the county and municipal authorities, which have responsibility for health services supplied to the general public. In this way, the medical officers function as independent advisers and supervisors at all levels and are authorized to take necessary measures either by consultation or by handing over further treatment of a case to the central authorities. The institutions are attached to the National Board of Health, both professionally and financially.

Supervision of health care personnel and their professional activity is carried out by the National Board of Health in close collaboration with the local medical officers. Decisions concerning individuals may in such cases be appealed to the responsible minister and, if necessary, to the courts.

The Patients' Complaints Board deals with complaints concerning authorized health care personnel. Following preliminary

### 1.3 Tilsyn med sundhedsvæsenet

**DANMARK:** Tilsynet med sundhedsvæsenet er dels baseret på loven om sundhedsvæsenets centralstyrelse, dels på særlovgivning, først og fremmest om de forskellige grupper af medicinsk personale (lægeloven, sygeplejeloven, m.fl.). Tilsynet udføres dels af Sundhedsstyrelsen, dels af embedslægerne.

Embedslægerne er ansat ved embedslægeinstitutionerne, som der er én af i hvert amt, samt én i Københavns Kommune. Disse institutioner er statslige og således politisk og administrativt uafhængige af amter og kommuner, der har ansvaret for sundhedsvæsenets betjening af befolkningen. Embedslægerne kan således fungere som uafhængige rådgivere og er tilsynsførende på alle niveauer. Institutionerne er bemyndiget til at foretage det fornødne, enten i form af påtale eller ved videregivelse af sagens behandling til de centrale tilsynsmyndigheder. Såvel fagligt som budgetmæssigt er embedslægeinstitutionerne knyttet til Sundhedsstyrelsen.

Tilsynet med det medicinske personale og deres professionelle virksomhed udføres af Sundhedsstyrelsen i tæt samarbejde med de lokale embedslæger. Afgørelser vedrørende enkeltpersoner kan i sådanne sager indankes for den ansvarlige minister og eventuelt domstolene.

Klager over autoriseret sundhedspersonale indgives til Patientklagenævnet. Efter forbehandling af sagerne (partshørin-

treatment of the cases (hearings of the parties, professional assessment, etc.) by the medical officer, a final decision is reached by the Patients' Complaints Board.

In connection with the statutory planning of the preparation of guidelines and debates about adhering to them, supervision of health services is primarily carried out through collaboration between the decentralized authorities. Daily activity is furthermore monitored through submission, by counties and municipalities, of specified budgets and accounts, and statistical data to various centralized registers. Supervision concerning specific issues is only brought up in exceptional cases.

**FAROE ISLANDS:** The rules for supervision of health services are, by and large, the same as in Denmark, both concerning who has responsibility for supervision (the chief medical officer), regarding in which areas supervision shall be carried out and procedures for complaints.

**GREENLAND:** The Office of the Chief Medical Officer, an independent institution under the Greenland Home Rule Government, is responsible for supervision of health services. The chief medical officer advises and assists the Greenland Home Rule Government and other authorities in questions of health. Areas of supervision include health care institutions, health care personnel, municipal institutions and other institutions. Complaints about health issues are addressed in writing to the Office of the Chief Medical Officer, which prepares the case and evaluates the complaint before forwarding it to the Danish Patients' Complaints Board of the Board of Health in Copenhagen. This board completes the

ger, faglig vurdering m.v.) hos embedslægen træffes den endelige afgørelse af Patientklagenævnet.

Tilsynet med sundhedsvæsenets virksomhed udføres primært som et samarbejde mellem de decentrale myndigheder i forbindelse med det lovbestemte planlægningsarbejde om udformning af vejledende retningslinier og i en dialog om disses efterfølgelse. Desuden følges den løbende aktivitet gennem amternes og kommunernes indberetning af specificerede budgetter og regnskaber og statistiske data til forskellige centrale registre. Der er kun undtagelsesvis anledning til at rejse tilsynssager om konkrete spørgsmål.

**FÆRØERNE:** Reglerne for tilsyn med sundhedsvæsenet er i alt væsentligt identiske med forholdene i Danmark, både hvad angår hvem der fører tilsynet (Embedslægen/Landslægen), hvilke områder der føres tilsyn med samt vedrørende klageadgange/muligheder.

**GRØNLAND:** Tilsynsmyndigheden er Embedslægeinstitutionen i Grønland som er en sundhedsfagligt uafhængig institution under Grønlands Hjemmestyre. Embedslægeinstitutionen yder rådgivning og anden bistand i sundhedsfaglige spørgsmål til Landsstyret og andre myndigheder. Tilsynsområderne er sundhedsvæsenets institutioner, sundhedsfaglige personer samt kommunale og andre institutioner. Sundhedsfaglige klager rettes skriftligt til Embedslægeinstitutionen, som vurderer, forbereder og sagsfremstiller klagen, før den videresendes til Sundhedsvæsenets Patientklagenævn i København som foretager den endelige behandling, høring og afgørelse. Klager

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preparation of the case, arranges a hearing and makes a decision. Complaints about health services and questions concerning compensation are dealt with by the Directorate of Health.

**FINLAND:** Supervision of health services in Finland is organized in a less formal way than in the other Nordic countries. Supervisory tasks are spread out among the whole health services system.

The most important channel for nationwide supervision of health and social services is through legislation and related nationwide plans for the health and social sector. Overall planning, coordination and supervision of the statutory services is the responsibility of the Ministry of Social Affairs and Health. Planning, managing and supervising services at the county level is the responsibility of the county authorities. The chief medical officers and the forensic pathologists act as medical advisers to the regional administration.

A nationwide body for the protection of patients rights has been established. The body may assess whether the services provided by a municipality are up to the required standards. If the body finds that the services are inadequate, and that the municipality is responsible for this, then it may recommend how the deficiencies may be dealt with and give a time limit for when improvements shall be made.

Patients have many possibilities to complain about the treatment or services they have received. The simplest way is to express dissatisfaction to the physician who provided the treatment, or to contact the physician in charge of the hospital department or health centre. If further assistance is needed in order to solve the

over service samt krav om erstatninger behandles af Direktoratet for Sundhed.

**FINLAND:** Tilsynet med sundhedsvæsenet er i Finland organiseret mindre formelt end i de andre nordiske lande. Arbejdsopgaverne er spredt ud i hele sundhedssystemet.

De vigtigste kanaler til den landsdækkende styring af social- og sundhedsvæsenet er lovgivning, dertil hørende forordninger og de landsdækkende planer for social- og sundhedsområdet. Den generelle planlægning, styring og tilsynet med de lovpligtige ydelser påhviler Social- och hälsovårdsministeriet. Planlægning, styring og tilsyn inden for lenene påhviler länsstyrelserne. Embedslægerne og retslægerne fungerer som lægelige rådgivere for den regionale administration.

Der er oprettet et landsdækkende grundretighedsnævn (grundskyddsämnd). Nævnet kan vurdere hvorvidt de enkelte kommuners service lever op til kravene. Hvis nævnet finder, at kommuners servicesystem er mangelfuldt, og at kommunerne bærer ansvaret herfor, kan nævnet anbefale kommunen hvordan manglerne skal udbedres og indenfor hvilken tidsramme det skal ske.

Patienterne har mange muligheder for at klage over den behandling eller service som de har modtaget. Den mest simple måde er at give udtryk for sin utilfredshed overfor den læge som har stået for behandlingen eller henvende sig til den læge som leder afdelingen eller sundhedscentret. Hvis det er nødvendigt med

problem, there are two possibilities. The patient can contact either the Office of the Chief Medical Officer or the National Authority for Medicolegal Affairs. Both these bodies can give an expert opinion, or give sanctions if necessary.

**ÅLAND:** Supervision of health care personnel is carried out according to Finnish law.

Complaints concerning treatment can either be addressed, as in Finland, to the institution providing the treatment or to the national authorities - or to the Åland Government. In Åland, the patient ombudsman is employed by the Åland Government and is thus independent of the respective treatment institutions. The patient ombudsman may take up questions of principal significance with the "Patients Board of Trust" where the questions may be discussed and form the basis for decisions, although the committee cannot decide individual cases.

**ICELAND:** The Medical Director of Health has overall responsibility for supervision of health institutions, health care personnel, prescription of pharmaceutical products, measures for combating substance abuse and control of all public health services.

The Icelandic Medicines Control Agency (IMCA) supervises pharmacies and pharmaceutical products.

Complaints concerning health services are addressed to the Medical Director of Health, who evaluates the complaints and makes decisions. The leadership in the institution involved must also be informed about the complaint. In case of conflict, the case can be dealt with by a special board (consisting of

ekstern assistance for at løse problemet kan patienten enten henvende sig til embedslægen eller Rättsskyddscentralen för hälsovården. Begge har muligheder for at komme med udtalelser og sanktioner hvis det er påkrævet.

**ÅLAND:** Tilsynet med sundhedspersonalet sker efter finsk lovgivning.

Klager over behandlingen kan - som i Finland - enten indgives til de respektive behandlingsinstitutioner eller til de nationale myndigheder - eller til Landskapsregeringen. På Åland er patientombudsmanden ansat af Landskapsregeringen og er således uafhængig i forhold til de respektive behandlingsinstitutioner. Patientombudsmanden kan tage principielt vigtige spørgsmål op i "fortroligheds-nævnet" hvor spørgsmålene kan diskuteres og danne grundlag for afgørelser, men nævnet kan ikke afgøre de enkelte sager.

**ISLAND:** Medicinaldirektøren fører fagligt tilsyn med sundhedsinstitutionerne, sundhedspersonalet, ordination af lægemidler (recepter), misbrugsbekæmpelse og kontrol med alle offentlige sundhedsforanstaltninger.

Lægemiddelstyrelsen fører det farmaceutiske tilsyn med apoteker og lægemidler.

Medicinaldirektøren modtager klager vedrørende sundhedsvæsenet og foretager de nødvendige undersøgelser og træffer afgørelserne. Sundhedsinstitutionernes ledelse skal dog gøres bekendt med klagen. Opstår en konflikt kan sagen tages op i et særligt nævn (nævnet består af tre personer som er

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three persons appointed by the Supreme Court). Complaints can also be forwarded directly to this board.

**NORWAY:** The Norwegian Board of Health (centrally) and the Norwegian Board of Health in each county are responsible for supervision of health services and health care personnel.

These bodies are professional and independent supervision authorities, with competence in the fields of health service and health legislation.

Supervision of health services by the Norwegian Board of Health can be divided into three main areas: 1. general supervision, 2. supervision of health services and 3. supervision of health care personnel.

General supervision involves monitoring health services provision and observing trends in the health status of the population. Such information is used to evaluate the supply of health services, both in relation to the needs of the population and in relation to national aims and priorities.

Supervision of health services is carried out in three ways:

1. Organizational audits: systematic appraisal of health care, to ascertain whether activities and results are in accordance with current laws and regulations, and whether internal control systems function in practice. Every institution providing health services has a duty to establish an internal control system to ensure that the institution is run in accordance with laws and regulations.

udpeget af Højesteret). Klager kan også gå direkte til nævnet.

**NORGE:** Helsetilsynet (centralt) og Helsetilsynet i amterne (fylkene) fører sammen tilsyn med sundhedsvæsenet og sundhedspersonale.

Disse organer skal være faglig kompetente og uafhængige tilsynsmyndigheder med forskellig kompetence indenfor sundhedsservice og sundhedslovgivning.

Helsetilsynets tilsynsopgaver overfor sundhedsvæsenet kan opdeles i 3 områder: 1. overvågning af lovgivningen 2. tilsyn med virksomhederne og 3. tilsyn med sundhedspersonale (hændelsesbaseret tilsyn).

Det generelle tilsyn består af at føre kontrol med social- og sundhedsvæsenets ydelser samt følge med i befolkningens behov, og derudfra vurdere behovsdækningen og tilbudsudformningen i forhold til de nationale mål og prioriteringer.

Tilsynet med sundhedsvæsenet sker på tre måder:

1. Systemrevision: Systematiske undersøgelser, for at fastslå om aktiviteter og tilhørende resultater er i overensstemmelse med de krav der fastsættes i henhold til love og forskrifter, samt om det interne kontrolsystem fungerer i praksis. Enhver virksomhed der udbyder sundhedsydelser har pligt til at etablere et internt kontrolsystem med henblik på at sikre at virksomheden drives i overensstemmelse med love og forskrifter.

- |                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>2. Surveys: collection of data and information from health care institutions or about patient groups.</p> <p>3. Verification: random checks to verify whether internal control systems function in practice, and whether activities are in accordance with the requirements laid down by the health authorities.</p> | <p>2. Kortlægning: Indsamling af data og oplysninger fra virksomheder eller om patientgrupper.</p> <p>3. Verificering: Kontrollere at den interne kontrol fungerer i praksis og at aktiviteterne er i overensstemmelse med myndighedernes krav (hændelsesbaseret tilsyn).</p> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Supervision of health care personnel:

The Norwegian Board of Health in the counties process complaints against individual health care personnel. They can find that the conditions laid down in laws and regulations have not been met and can give advice on how to make improvements.

If there are grounds for more serious sanctions against health care personnel, the complaint may be forwarded to the Norwegian Board of Health (centrally).

If health care personnel do not comply with the regulations, the Norwegian Board of Health may give them a warning, or may suspend or recall their authorization or approval as health care personnel.

Patients can also address their complaints to the person in charge of an institution (e.g. the municipal board in the case of municipal health services), or to the Norwegian System for Compensation for Injuries to Patients, in the case of claims for compensation related to treatment in the public health service. The Patient Injury Act, which came into force on 1 January 2003, enhances patients' possibilities to complain, among other things by describing both the complaints procedure and patients' rights.

Tilsyn med sundhedspersonale:

Helsetilsynet i amterne (fylkene) behandler klager rettet mod institutioner/virksomheder og den enkelte sundhedsmedarbejder. I tilfælde af, at der konstateres afvigelser fra regelsættene kan de rette kritik mod de aktuelle aktører.

Hvis der er et grundlag for at benytte strengere sanktioner oversendes klagen til Helsetilsynet (centralt).

Hvis sundhedspersonalet ikke overholder regelsættene kan Helsetilsynet give sundhedspersonalet en tilrettevisning eller advarsel, eller den kan suspendere eller tilbagekalde autorisation/godkendelse som sundhedsmedarbejder.

Patienterne vil også kunne klage til den ansvarlige for virksomheden (fx kommunalbestyrelsen når det gælder kommunale sundhedsydelser) eller til Norsk patientskadeerstatning, hvis der er tale om erstatning som følge af behandling i det offentlige sundhedsvæsen. Patient-skadeloven, der gælder fra og med 1. januar 2003, styrker patienternes klageadgang i forhold til tidligere ordninger, blandt andet ved at klageordningen beskrives og ved at forskellige rettigheder omtales.

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**SWEDEN:** The county and regional authorities are responsible for offering high quality health care for residents in their area. They are also responsible for community dental care (primarily for children and young persons).

Through legislation, the government sets the framework and supervises all activities.

The National Board of Health and Welfare is the central supervisory authority for health services and hospital services. According to the Act concerning Active Health Personnel, the National Board of Health and Welfare has responsibility for supervision of all health services except for those provided by the army. The Board has six regional offices. In addition to the National Board of Health and Welfare, there are several central supervision authorities within environmental and health protection.

Pursuant to the Act concerning Support and Service for Persons with Certain Functional Impairments, the municipalities have most of the responsibility for mentally handicapped people. The county and regional authorities have responsibility only for specific advice and personal support that requires special knowledge about the problems and life situation of people with severe and permanent disabilities.

The agencies with overall responsibility for health services have their own impartial (patient) boards that are independent of health institutions. Patients' complaints may be addressed to these boards. The main aims of these boards are to provide sound information and to ensure acceptable solutions for patients.

**SVERIGE:** Det er landstingene og regionerne som har ansvaret for at tilbyde en god sygdomsbehandling for indbyggerne i deres områder. De har ligeledes ansvaret for den offentlige tandpleje (først og fremmest for børn og unge).

Gennem lovgivning fastlægger staten rammerne for virksomheden og fører tilsyn med den.

Socialstyrelsen er statens centrale tilsynsmyndighed for sundheds- og sygehusvæsenet. I følge loven om erhvervsvirksomhed indenfor sundhedsområdet er Socialstyrelsen tilsynsmyndighed for hele sundhedsvæsenet, med undtagelse af sundhedsydelser inden for forsvaret. Styrelsen har seks regionale kontorer. Som et supplement til Socialstyrelsen er der et antal centrale tilsynsmyndigheder inden for miljø- og sundhedsbeskyttelse.

Ansvaret for de psykisk udviklingshæmmede er jf. loven om støtte og service til visse funktionssvigt i hovedsagen henlagt til kommunerne. Landstingene og regionerne har kun ansvaret for den særlige, aktiverende rådgivning og anden personlig støtte, som kræver særlig indsigt i problemer og livsbetingelser for personer med store og permanente funktionsnedsættelser.

De hovedansvarlige for sundhedsvæsenet har egne upartiske nævn (patientnævn) som er uafhængige af behandlingsstederne og hvortil man kan henvise klager fra patienterne. Hovedformålet med nævne er at de skal bidrage med god information og at sikre løsninger som patienterne er indforståede med.

The Medical Responsibility Board (HSAN) is an independent government authority that deals with complaints against health care personnel.

Hälso- och sjukvårdens ansvarsnämnd (HSAN) (Sundhedsvæsenets ansvars-nævn) er en uafhængig statslig myndighed som efterprøver klager over sundhedspersonale.

#### 1.4 Financing of health services

In the Nordic countries, the health services are mainly financed by the public authorities. In Iceland, contributions are primarily made by the government, while financing in the other countries mainly consists of county and/or municipal taxes with general grants from the governments. In the Nordic countries, the governments issue block grants to the counties and/or municipalities. With the exception of Greenland, citizens in the Nordic countries contribute directly to financing, partly through insurance schemes, partly by paying user charges. A financing model for somatic hospitals was established in Norway (as from 1 July 1997) that combines block grants and fee for service financing. The scheme is regularly evaluated and adjusted. The fee for service financing is based on the principle that a service producer (i.e. the hospital) is paid on the basis of services rendered. The scheme involves the state reimbursing a percentage of the average DRG expense (Diagnosis Related Groups) in connection with treatment of patients in the counties.

#### 1.4 Finansiering af sundhedsvæsenet

I de nordiske lande finansieres sundhedsvæsenet hovedsageligt af det offentlige. I Island er det primært staten, der bidrager, mens finansieringen i de øvrige lande stammer fra amtskommunale og/eller kommunale skatter samt bloktilskud fra staten. I de nordiske lande yder staten et generelt bloktilskud til amter og/eller kommuner. Med undtagelse af Grønland bidrager borgerne i de nordiske lande direkte til finansieringen, dels gennem forsikringsordninger, dels ved brugerbetaling. For Norges vedkommende er der etableret en finansieringsmodel for de somatiske sygehuse (fra 1. juli 1997) som kombinerer bloktilskud og stykprisfinansiering. Ordningen bliver jævnligt evalueret og justeret. Stykprisfinansieringen bygger på det princip, at en serviceproducent (det vil sige sygehuset) får indtægter beregnet ud fra udførte serviceopgaver. Ordningen indebærer, at staten refunderer en vis procentandel af de gennemsnitlige DRG-udgifter (Diagnose Relaterede Grupper) ved amtskommunal patientbehandling.

## 1.5 Charges for health care as per 1 January 2006

### *Consultation with a physician*

**DENMARK:** As shown in the overview, there are no user charges in Denmark, the Faroe Islands and Greenland.

**FINLAND:** The following charges may be made for outpatient treatment in health centres:

- A fixed annual charge of max. EUR 22 within one year or:
- A fixed charge per visit of max. EUR 11. The charge is only made for the first three visits at the same health centre during one calendar year.

A charge of EUR 15 can be made for visits to a health centre on weekdays between the hours of 2000 and 0800, and on Saturdays, Sundays and public holidays.

The charges do not apply to persons under 18 years of age.

Reimbursements of private physicians' fees are based on fixed charges. The National Social Insurance Institution reimburses 60 per cent of the physician's fee. However, in most cases the actual charge is higher and thus the reimbursement is less than 40 per cent.

**ÅLAND:** For medical consultations within the primary health service at the clinic or for home visits, there is a user charge of EUR 18. Outside the opening hours the

## 1.5 Egenbetaling for sundheds-ydelser pr. 1. januar 2006

### *Lægebesøg*

**DANMARK:** Som det fremgår af oversigten er der ingen egenbetaling i Danmark, på Færøerne og i Grønland.

**FINLAND:** I forbindelse med den primære lægebehandling ved sundhedscentre kan der opkræves følgende betaling:

- En fast årlig betaling på højst 22 EUR inden for et år, eller:
- Et fast beløb pr. besøg, dog højst 11 EUR. Beløbet skal kun betales for de første tre besøg på et og samme sundhedscenter i løbet af samme kalenderår.

Der kan opkræves en betaling på 15 EUR for besøg ved helsecentrene på hverdage mellem kl. 20 og kl. 8 samt lørdage, søndage og helligdage.

De nævnte beløb opkræves ikke af personer under 18 år.

Tilskud til behandling hos en privatpraktiserende læge er baseret på et fast egenbetalingsbeløb. Folkpensionsanstalten refunderer 60 pct. af lægens honorar. I de fleste tilfælde er egenbetalingen dog større og refusionen derfor mindre end 40 pct.

**ÅLAND:** Egenbetaling for lægebesøg inden for det primære sundhedsvæsen i konsultationen eller ved hjemmebesøg er 18 EUR. Uden for åbningstiden er det

charge is EUR 27. The maximum patient contribution for primary health care and outpatient treatment is EUR 450 within one calendar year, after which there is no charge for the remainder of the year, with the exception of short-term stays in institutions/hospitals, where the charge is reduced from EUR 27 per day to EUR 15 per day. For children and young people under 18, the maximum user charge is EUR 200 per calendar year, after which there is no user charge for further treatment, including short-term treatment in hospital. People over 18 years of age with an income below EUR 14 000 or EUR 22 000 for a husband and wife or partners, pay only EUR 225 per year, because of their low income. The activities included in the maximum user charge have been fixed beforehand. If there is a waiting period of 45 minutes or more in connection with a scheduled visit, within opening hours, the user charge is reimbursed.

**ICELAND:** Preventive health care consultations for pregnant women and mothers with infants, and school health care are free of charge.

The patient charge for a consultation in a health centre or with a private general medical practitioner during normal working hours is ISK 700. The charge is ISK 350 for children under 18, pensioners, disabled people, and long-term unemployed people. The charge is ISK 230 for disabled people and children who are chronically ill. Outside normal working hours the charges are ISK 1 750, 800 and 500 respectively. Charges for home visits are ISK 1 850, 700 and 500 during the daytime and ISK 2 600, 1 000 and 700 in the evenings and at night.

27 EUR. Der er indført maksimal egenbetaling på 450 EUR for lægebesøg og ambulant behandling indenfor et kalenderår hvorefter der ikke betales den resterende del af året med undtagelse af kortvarig institutions/hospitalsophold hvor betalingen reduceres fra 27 EUR pr døgn til 15 EUR pr døgn. For børn og unge under 18 år er den maksimale egenbetaling 200 EUR per kalenderår, herefter er al behandling uden egenbetaling, inklusiv korttidsbehandling på en hospitalsafdeling. Personer der er over 18 år med en indkomst på maksimalt 14 000 EUR, eller 22 000 EUR for ægtefæller eller samboende betaler kun 225 EUR per år på grund af den lave indkomst. De aktiviteter som medregnes i den maksimale egenbetaling er fastlagt på forhånd. Hvis der er en ventetid på 45 minutter eller mere ved en aftalt besøg, indenfor åbningstiden, tilbagebetales egenbetalingen.

**ISLAND:** Lægebesøg af forebyggende karakter for gravide, mødre og deres børn samt skolesundhedsplejen er uden egenbetaling.

Egenbetalingen for konsultation i sundhedscentrene eller ved en privat praktiserende læge er i dagtimerne 700 ISK og 350 ISK for børn under 18, pensionister, funktionshæmmede og langtidsarbejdsløse. Funktionshæmmede og langtidssyge børn betaler 230 ISK. Konsultation udenfor dagtimerne er henholdsvis 1 750, 800 og 500 ISK. For hjemmebesøg er betalingen i dagtimerne 1 850, 700 og 500 ISK mens aften- og nattaksten er 2 600, 1 000 og 700 ISK.

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The charge for a consultation with a specialist is either ISK 2 700 plus 40 per cent of the remaining cost of the consultation, or ISK 900 plus one third of the remaining 40 per cent. The minimum charge for disabled and chronically ill children is ISK 450. The maximum charge for all groups is ISK 18 000. The same patient charges apply to outpatient treatment in hospitals. Different charges apply to laboratory tests and X-ray examinations.

Patient charges for persons who have been continuously unemployed for a period of 6 months or longer are the same as for pensioners.

**NORWAY:** There is a user charge for medical consultations with general medical practitioners and specialists, outpatient treatment in hospitals, and treatment in casualty clinics.

The user charges for a consultation with a physician and for casualty services are: primary physician: NOK 125 (day), NOK 210 (evening), specialist: NOK 150 (day), NOK 235 (evening).

The user charges for a home visit are: primary physician: NOK 170 (day) and NOK 280 (evening), specialist: NOK 195 (day) and NOK 305 (evening).

The user charge for a consultation at a hospital out-patient department is NOK 265.

The user charge for laboratory tests, histological tests and cytological tests is NOK 47.

The user charge for a radiograph or an ultrasound examination is NOK 200.

Egenbetalingen for besøg hos en specialist er enten 2 700 ISK plus 40 pct. af de resterende udgifter, eller 900 ISK og en tredjedel af de resterende 40 pct. For funktionshæmmede og langtidssyge børn er egenbetalingen minimum 450 ISK. For alle grupper er maksimumbetalingen 18 000 ISK. Egenbetalingen er den samme ved behandling ved hospitalernes ambulatorier men en anden for laboratorieprøver og røntgenbehandling.

Egenbetaling for personer som har været arbejdsløse i en samlet periode på 6 måneder eller mere er den samme som for pensionister.

**NORGE:** Der er egenbetaling for lægebesøg hos både almene læger og speciallæger, ambulant behandling ved sygehuse samt behandling hos lægevagten.

Egenbetalingen for konsultation hos en læge og hos lægevagten er følgende: Almenlæge: 125 NOK (dag) og 210 NOK (aften). Hos en specialist: 150 NOK (dag) og 235 NOK (aften).

Egenbetalingen ved sygebesøg er som følgende: Almen læge 170 NOK (dag) og 280 NOK (aften), speciallæger: 195 NOK (dag) og 305 NOK (aften).

Egenbetalingen for ikke-indlagte patienter på et hospital er 265 NOK.

Egenbetalingen for laboratorie-, histologiske- og cytologiske prøver er 47 NOK.

Egenbetaling for røntgen- og ultralydsundersøgelser er 200 NOK.

User charges for a consultation with a physician

|               | Are there consistent rules for the whole country? | Size of user charge                                                                                                                           | Deviations                                                                                                                                                                                                                                                 | User charge in relation to total cost of consultation |
|---------------|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| Denmark       | Yes                                               | -                                                                                                                                             | No                                                                                                                                                                                                                                                         | -                                                     |
| Faroe Islands | Yes                                               | -                                                                                                                                             | No                                                                                                                                                                                                                                                         | -                                                     |
| Greenland     | Yes                                               | -                                                                                                                                             | No                                                                                                                                                                                                                                                         | -                                                     |
| Finland       | Yes                                               | Public EUR 0-11 EUR 15 if the visit occurs between 2000 and 0800 or on a Saturday, a Sunday or a public holiday. Private min. 40 per cent     | No charge for children under 18 years of age                                                                                                                                                                                                               | ..                                                    |
| Åland         | Yes                                               | EUR 18<br>Outside opening hours EUR 27                                                                                                        | Free treatment after paying EUR 450, EUR 200 for children below 18 and EUR 225 for persons with low income                                                                                                                                                 | ..                                                    |
| Iceland       | Yes                                               | ISK 700-2 600 in primary care, other rules for specialized care                                                                               | ISK 350-1000 for children under 18 years of age, pensioners, disabled and long-term unemployed. For handicapped and chronically ill children ISK 230-700                                                                                                   | Varies                                                |
| Norway        | Yes                                               | Consultation with a primary physician: NOK 125 (day), NOK 210 (evening)<br>Consultation with a specialist: NOK 150 (day) and NK 235 (evening) | In the case of pregnancy, childbirth, treatment of industrial injuries, war injuries, for prison inmates, children under 7 years of age, in the case of psychotherapy for persons under 18 years of age and for treatment of dangerous contagious diseases | Approx. 35 per cent                                   |
| Sweden        | No                                                | SEK 100-300                                                                                                                                   | Yes                                                                                                                                                                                                                                                        | ..                                                    |

There is a user charge for assisted fertilization and sterilization. The rules for patient charges for sterilization do not apply if there are medical indications for the operation.

The Health Insurance Scheme offers full reimbursement for treatment of children under the age of seven years, treatment of industrial injuries, war injuries, pregnancy and childbirth, and, in certain other cases (e.g. treatment of dangerous contagious diseases, psychotherapy for persons under the age of 18 years, and treatment of prison inmates).

Der er desuden egenbetaling for kunstig befrugtning og sterilisering. Der er ingen egenbetaling for sterilisering, hvis indgrebet skyldes en medicinsk indikation.

Folketrygden yder fuld refusion ved behandling af børn under 7 år, ved behandling af arbejdsskader, krigsskader, svangerskab/fødsler og i enkelte andre tilfælde (fx behandling af farlige, smitsomme sygdomme, psykoterapeutisk behandling af personer under 18 år og behandling af indsatte i fængsler).

## ORGANIZATION OF HEALTH SERVICES

### Egenbetaling for lægebesøg

|          | Er der ensartede regler i hele landet? | Egenbetalingens størrelse                                                                                                              | Afvielser                                                                                                                                                                                  | Egenbetalingens andel af de samlede udgifter til lægebesøg |
|----------|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| Danmark  | Ja                                     | -                                                                                                                                      | Nej                                                                                                                                                                                        | -                                                          |
| Færøerne | Ja                                     | -                                                                                                                                      | Nej                                                                                                                                                                                        | -                                                          |
| Grønland | Ja                                     | -                                                                                                                                      | Nej                                                                                                                                                                                        | -                                                          |
| Finland  | Ja                                     | Offentlig 0-11 EUR.<br>15 EUR for besøg mellem kl. 20-8 på hverdage, samt lørdage, søndage og helligdage<br>Privat mindst 40 pct.      | Ingen betaling for børn under 18 år                                                                                                                                                        | ..                                                         |
| Åland    | Ja                                     | 18 EUR<br>27 EUR udenfor åbningstiderne                                                                                                | Fri behandling når der er betalt 450 EUR, 200 EUR for børn under 18 år, 225 EUR for personer med lav indkomst                                                                              | ..                                                         |
| Island   | Ja                                     | 700-2.600 ISK hos almen læge, andre regler for besøg hos specialist                                                                    | 350-1 000 ISK for børn under 18 år og for pensionister, handicappede og langtidsarbejdsløse. For handicappede og langtids-syge børn 230-700 ISK                                            | Varierende                                                 |
| Norge    | Ja                                     | Hos almen læge: 125 NOK (dagtimer) 210 NOK (aften og nat) Konsultation hos en specialist: 150 NOK (dagtimer) og 235 NOK (aften og nat) | Ved svangerskab/fødsel, erhvervsskade, krigsskade, for indsatte i fængsel, børn under 7 år, ved psykoterapeutisk behandling af børn og unge under 18 år og ved farlige smitsomme sygdomme. | Ca. 35 pct.                                                |
| Sverige  | Nej                                    | 100 - 300 SEK                                                                                                                          | Ja                                                                                                                                                                                         | ..                                                         |

**SWEDEN:** Local authorities (county and regional authorities) set the charges themselves. According to the law, the maximum amount a patient shall pay for out-patient treatment is SEK 900 during a 12-month period. For medical consultations in out-patient clinics and visits to a health centre or a general medical practitioner, the user charge varies from SEK 100 to 150. The patient charge for a medical consultation with a specialist (in hospitals or in private practice) varies from SEK 200 to 300.

**SVERIGE:** De lokale myndigheder (landstingene og regionerne) fastsætter selv taksterne. I følge loven skal patienter højest betale 900 SEK for ambulant behandling for en 12 måneders periode. For ambulant behandling, besøg på helsecentre eller hos huslægen varierer egenbetalingen fra 100 til 150 SEK, mens den varierer fra 200 til 300 SEK ved lægebesøg hos specialister (ved sygehusene eller hos privatpraktiserende læger).

In most counties/regions, children and young people under the age of 20 years may attend an outpatient clinic free of charge. In some counties children and young people pay a lower user charge than adults. In the regions, the age limit for paying user charges varies from 16 years to the calendar year in which a person turns 20. In one county, user charges are lower for persons 65 years of age and older.

I de fleste landsting/regioner kan børn og unge under 20 år gå til ambulant lægebehandling uden brugerbetaling. I nogle landsting betaler børn og unge en lavere egenbetaling end voksne. I regionerne varierer grænsen for at der ikke opkræves brugerbetaling mellem 16 år og det kalenderår hvor man fylder 20 år. I et landsting er egenbetalingen lavere for personer 65 år og ældre.

### *Reimbursement for pharmaceutical products*

**DENMARK:** There are no fixed percentages for reimbursement of fees for pharmaceutical products in Denmark, since reimbursement depends on the amount of pharmaceutical products used by the individual patient. The percentage of reimbursement increases proportionally with the patient's use of pharmaceutical products.

Reimbursable pharmaceutical products are products with a documented and valuable therapeutic effect for a clear indication, where the price of the pharmaceutical product is reasonable in relation to its therapeutic value.

An individually assessed subsidy may be granted by submitting an application through one's own doctor to the Danish Medicines Agency.

The Danish Medicines Agency determines a reference price for each group of pharmaceutical products covered by the reference price system. The reference price forms the basis for calculating the subsidy.

### *Tilskud til lægemidler*

**DANMARK:** Tilskuddene i Danmark er ikke forsynet med en fast procentsats, da tilskuddet afhænger af størrelsen af den enkelte patients lægemiddelforbrug. Procentsatsen stiger i takt med patientens lægemiddelforbrug.

Lægemidler med tilskud er lægemidler med en sikker og værdifuld terapeutisk effekt på en velafgrænset indikation, hvor lægemidlets pris står i rimelig forhold til dets behandlingsmæssige værdi.

Der kan opnås individuelt tilskud til lægemidler uden generelt tilskud ved at indsende ansøgning til Lægemiddelstyrelsen gennem egen læge.

Lægemiddelstyrelsen udarbejder en tilskudspris for hver af de lægemiddelgrupper, der er omfattet af tilskudsprissystemet. Tilskudsprisen er den pris, der lægges til grund for beregning af tilskud.

## ORGANIZATION OF HEALTH SERVICES

The subsidy is calculated on the basis of the reference price of each packet. Thus, the subsidy cannot be higher than the actual cost of the medicinal product. There are no changes to subsidy based on need.

The aim of the system is that physicians and dentists shall choose the cheapest product on the market (substitution). In special cases, the physician or dentist can choose not to substitute, if he or she finds that substitution by the pharmacy is not appropriate.

Current prices are determined for all pharmaceutical products on the market that have a marketing licence.

Since liberalization in October 2001, there are now more than 1 300 authorized agents for non-prescription pharmaceutical products for people or animals (products that are not restricted to pharmacies).

All authorized businesses, irrespective of the selection of pharmaceutical products that they sell, must follow the current regulations relating to storage and quality of pharmaceutical products, and the prohibition against self-service sale and sale to children under 15 years of age.

In addition, agents for non-prescription pharmaceutical products for people shall offer a basis selection of goods, determined by legislation. For certain non-prescription pharmaceutical products, such as drugs for pain relief, no more than one packet can be sold per customer per day.

A list of pharmaceutical products that can be sold outside pharmacies is to be found on the web site of the Danish Medicines Agency:  
[www.laegemiddelstyrelsen.dk](http://www.laegemiddelstyrelsen.dk).

Beregningen af tilskud foretages ud fra den enkelte paknings tilskudspris. Der kan dog aldrig gives tilskud til mere end lægemidlets faktiske pris. Det behovsafhængige tilskud bevares uændret.

Systemet tilstræber at lægen/tandlægen vælger det billigste produkt på markedet (substitution). Lægen/tandlægen kan i særlige tilfælde fravælge substitution, når denne finder at substitution på apoteket er uhensigtsmæssigt.

Der udarbejdes løbende en specialitetstakst, som omfatter priser på alle markedsførte farmaceutiske specialiteter.

Siden liberaliseringen i oktober 2001, findes der i Danmark nu mere end 1 300 godkendte forhandlere af ikke apoteksforbeholdte håndkøbslægemidler til mennesker og/eller dyr.

Fælles for de godkendte forretninger uanset sortiment af lægemidler er, at de skal respektere gældende regler vedrørende opbevaring og kvalitet samt forbud mod selvvalg og salg til børn under 15 år.

Forhandlere af håndkøbsmedicin til mennesker skal desuden være i besiddelse af et basissortiment fastsat ved lov. Visse håndkøbslægemidler, f.eks. smertestillende, må ikke sælges mere end maksimum en pakning pr. kunde pr. dag.

Lister over lægemidler der må forhandles uden for apotek er tilgængelig på Lægemiddelstyrelsen hjemmeside  
[www.laegemiddelstyrelsen.dk](http://www.laegemiddelstyrelsen.dk).

**FAROE ISLANDS:** Part of the cost of pharmaceutical products is covered by health insurance contributions, and part is covered by patient contributions. Pensioners are reimbursed user charges exceeding a certain amount. The same applies to people who have been granted pharmaceutical products in accordance with the Social Security Act.

**GREENLAND:** All pharmaceutical products are distributed through the health service except for certain non-prescription pharmaceutical products. These are available, to a very limited degree, from certain general stores. Non-prescription pharmaceutical products are distributed to a varying degree by district health services.

**FINLAND AND ÅLAND:** There are three payment categories (42, 72 and 100 per cent) for prescription pharmaceutical products, and reimbursement is calculated separately for each purchase and for each category. However, there is a user charge of EUR 3 for pharmaceutical products with 100 per cent reimbursement.

Some new and expensive drugs (e.g. for dementia and multiple sclerosis), in special cases, are paid for by the hospital or municipality. New drugs are not automatically covered by the reimbursement scheme and many drugs are marketed without any reimbursement. Health economists have gained more and more influence in relation to which products should be reimbursed.

In addition to reimbursement for medicines, reimbursement can also be given for diet for some treatment-intensive diseases and for ointments used in the treatment of chronic skin diseases.

**FÆRØERNE:** En del af medicinudgifterne dækkes af sygekassekontingent og en del af brugerbetaling. Pensionister får refunderet brugerbetalingen over et vist beløb. Medicin kan desuden bevilges efter forsorgsloven.

**GRØNLAND:** Al medicin distribueres gennem sundhedsvæsenet, bortset fra håndkøbsmedicin der i stærkt begrænset omfang forhandles fra enkelte dagligvarebutikker. Håndkøbsmedicin udleveres i varierende grad fra sundhedsvæsenet i distrikterne.

**FINLAND OG ÅLAND:** Der er tre betalingskategorier for receptpligtige lægemidler, (42, 72 og 100 pct.) og refusionen er beregnet separat for hvert indkøb og hver kategori. Der er dog en egenbetaling på 3 EUR på præparater med 100 procents refusion.

Nogle nye og meget dyre medikamenter (for eksempel mod demens og multipel sklerose) bliver i særlige tilfælde betalt af hospitalet eller kommunen. Der forekommer ingen automatisk accept af nye medikamenter i refusionssystemet og mange medikamenter bliver markedsført uden tilskud. Sundhedsøkonomerne har fået større og større indflydelse på hvilke medikamenter der skal gives tilskud til.

Ud over medicin kan der også gives tilskud til kost for nogle behandlingskrævende sygdomme ligesom til salver ved behandling af kroniske hudsygdomme.

## ORGANIZATION OF HEALTH SERVICES

As a main rule, the health insurance scheme reimburses expenditure on prescription pharmaceutical products exceeding EUR 616.72 in the course of one calendar year.

**ICELAND:** Pharmaceutical products for the treatment of certain diseases are paid for entirely by the health insurance scheme. For other types of pharmaceutical products, patients pay the full cost themselves.

In special cases, reimbursement by the health insurance scheme may be higher, so that the patient contribution is lower than shown in the overview.

There is a reference price system. For generic drugs of the same type, strength and package size, the reimbursement is calculated in relation to the maximum reference price, i.e. the lowest priced generic product. The present reference price list covers about 13 per cent of registered drug products.

**NORWAY:** Most pharmaceutical products are reimbursed according to a system based on diagnoses and approved pharmaceutical products prescribed by a physician (the so-called "blue prescription"). A condition is long-term need for the pharmaceutical product, medical equipment or medical item. The patient charge for these is 36 per cent of the cost, up to a maximum of NOK 500 per prescription. Children under seven years of age and persons who receive a minimum pension are exempt from patient charges for essential pharmaceutical products. For other pharmaceutical products, the patient pays the full price.

From 3 March 2003, the index price system was introduced for some pharmaceutical products available on "blue prescription". The arrangement with index price applies to pharmaceutical products that are exchange-

Som hovedregel dækker sygeforsikringen de udgifter til receptpligtige lægemidler som overskrider et beløb på 616,72 EUR i løbet af et kalenderår.

**ISLAND:** Lægemidler til behandling af visse sygdomme betales fuldt ud af sygeforsikringen. For andre typer af medicin betaler patienterne selv det fulde beløb.

I særlige, individuelle tilfælde kan refusionen fra sygesikringen være højere og egenbetalingen dermed lavere end det fremgår af oversigten.

Der findes desuden et referenceprissystem. For synonympræparater med samme form, styrke og forpakning, beregnes tilskuddet i forhold til den maksimale referencepris, forstået som den laveste pris på synonympræparatet. Den nuværende referenceprisliste dækker ca. 13 pct. af de registrerede lægemidler.

**NORGE:** De fleste lægemidler refunderes efter et system baseret på diagnoser og godkendte præparater foreskrevet af en læge (den såkaldte blå recept). Udgangspunktet er at man langvarigt har behov for lægemidlet, medicinsk udstyr eller forbrugsvarer. Egenbetalingen for disse er 36 pct., dog maksimalt 500 NOK pr. recept. Børn under 7 år og personer der modtager mindstepension betaler ikke for vigtige lægemidler. Andre lægemidler betales fuldt ud af patienten.

Fra den 3. marts 2003 er der indført et indexprissystem for en del medicin på "blå recept". Ordningen med indexregulering gælder lægemidler der er substituerbare, dvs. lægemidler der har den

able, that is to say medicines and drugs that have the same active ingredient. The purpose of the index price arrangement is to achieve increased use of the most reasonable alternative when the same medicines are available at different prices.

**SWEDEN:** The new Act on Pharmaceutical Benefits etc. came into force in 2002. A medical product is subsidized only if it has been approved by the Pharmaceutical Benefits Board and is on the list of approved pharmaceutical products. There are certain conditions that must be met before a medicinal product is added to the approved list and the price for the consumer is reduced. The code of the place of work must be on the prescription for reimbursement. The prescription must be for the cheapest product available from a pharmacy. The approved list of pharmaceutical products gives everyone the right to a reduced price for the approved product.

The discount is calculated according to the value of the medicinal product bought. For purchases of up to SEK 900 over a 12-month period, the user pays the full cost. A discount is given for costs exceeding this amount. For costs between SEK 900 and SEK 1 700, there is a 50 per cent discount. Between SEK 1 700 and SEK 3 300 the discount is 75 per cent, and between SEK 3 300 and 4 300 the discount is 90 per cent. When pharmaceutical products have been purchased to the value of SEK 4 300, the maximum limit for user charges has been reached. At this level, the patient will have paid SEK 1 800 and receives a free pass for the rest of the 12-month period. The scheme covers discount approved pharmaceutical products on prescription, including contraceptives and products used for stoma. Insulin is free of charge.

samme terapeutiske virkning. Formålet med indexreguleringen er at åbne for et større brug af rimelige alternativer idet der findes mange substanser med samme virkning men til en forskellig pris.

**SVERIGE:** I 2002 kom loven om lægemidler m.v. Det er en forudsætning at lægemiddelsnævnet har besluttet at lægemidlet skal omfattes af en godkendt liste over lægemiddelprodukter for at det kan gives tilskud til et lægemiddel. Desuden er der visse krav der skal opfyldes for at et lægemiddel skal kunne optages på den godkendte liste og give den enkelte forbruger en reduceret lægemiddelpri. Recepten skal være forsynet med en arbejdspladskode for at patienten kan få rabat. Lægemidler der bliver udleveret på recept skal udleveres som det billigste produkt der findes tilgængelig på apoteket. Den godkendte liste over lægemidler giver den enkelte ret til en reduceret pris på de godkendte produkter.

Rabatten udregnes efter værdien på de lægemidler som købes. For indkøb op til 900 SEK i en 12 måneders periode betaler man selv det hele. På udgifter derudover ydes der rabat. For udgifter mellem 900 SEK og 1 700 SEK gives der 50 pct. rabat. Mellem 1 700 og 3 300 SEK er rabatten 75 pct. og for udgifter mellem 3 300 SEK og 4 300 SEK er rabatten 90 pct. Når der er købt lægemidler for 4 300 SEK har man nået op på egenbetalingens maksimum. Patienten har ved dette niveau selv betalt 1 800 SEK og får så tildelt et frikort for resten af 12 måneders perioden. Ordningen omfatter rabatberettigede lægemidler på recept, inkl. P-piller og brugsartikler til stomier. Insulin er gratis.

## ORGANIZATION OF HEALTH SERVICES

### User charges for pharmaceutical products

|               | Are there consistent rules for the whole country? | Size of user charge                                                                                | Deviations                                                                                     | User charge in relation to total cost of pharmaceutical products |
|---------------|---------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Denmark       | Yes                                               | Reimbursement in relation to the level of the patient's consumption of drugs in the primary sector | No                                                                                             | 32 per cent                                                      |
| Faroe Islands | Yes                                               | ..                                                                                                 | No                                                                                             | ..                                                               |
| Greenland     | Yes                                               | -                                                                                                  | No                                                                                             | -                                                                |
| Finland       | Yes                                               | 58 per cent of the cost                                                                            | For certain diseases, EUR 3 or 28 per cent of the cost (disease specific)                      | 44 per cent                                                      |
| Åland         | Yes                                               | As in Finland                                                                                      | As in Finland                                                                                  | -                                                                |
| Iceland       | Yes                                               | ISK 1 700+ 65/80 per cent of the remaining cost, but max. ISK 3 400/4 950                          | Pensioners and disabled: ISK 600 + 50 per cent of the remaining cost, but max. ISK 1 050/1 375 | Approx. 64 per cent                                              |
| Norway        | Yes                                               | 36 per cent maximum NOK 500 per prescription                                                       | For children below 7 years and persons who receive a minimum pension: no user charge           | ..                                                               |
| Sweden        | Yes                                               | SEK 0-1 800                                                                                        | -                                                                                              | ..                                                               |

### Egenbetaling for lægemidler

|          | Er der ensartede regler i hele landet? | Egenbetalingens størrelse                                                                 | Afvigelser                                                                                        | Egenbetalingens andel af de samlede udgifter til lægemidler |
|----------|----------------------------------------|-------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| Danmark  | Ja                                     | Tilskud afhængig af størrelsen af den enkelte patients lægemiddelforbrug i primærsektoren | Nej                                                                                               | 32 pct.                                                     |
| Færøerne | Ja                                     | ..                                                                                        | Nej                                                                                               | ..                                                          |
| Grønland | Ja                                     | -                                                                                         | Nej                                                                                               | -                                                           |
| Finland  | Ja                                     | 50 pct. af beløbet                                                                        | Ved visse sygdomme betales 3 EUR eller 28 pct. af beløbet (sygdomsspecifikt)                      | 44 pct.                                                     |
| Åland    | Ja                                     | Som i Finland                                                                             | Som i Finland                                                                                     | -                                                           |
| Island   | Ja                                     | 1 700 ISK + 65/80 pct. af den resterende pris, dog højst 3 400/4 950 ISK                  | Pensionister og handicappede: 600 ISK + 50 pct. af den resterende pris, dog højst 1 050/1 375 ISK | Ca. 64 pct.                                                 |
| Norge    | Ja                                     | 36 pct. maksimum 500 NOK pr. recept                                                       | For børn under 7 år og personer som kun modtager mindstepension: ingen egenbetaling               | ..                                                          |
| Sverige  | Ja                                     | 0-1 800 SEK                                                                               | -                                                                                                 | ..                                                          |

*Treatment in hospitals*

As shown in the overview, there are no user charges for hospitalization in Denmark, the Faroe Islands, Greenland, Iceland and Norway. In Iceland and Norway, however, there is a charge for specialist out-patient treatment in hospitals, see the section on consultations with a physician.

**FINLAND AND ÅLAND:** Patients pay a charge for admission to hospitals and health centres: EUR 26 (Åland EUR 27), and psychiatric departments: EUR 12. For short-term treatment there is a charge of EUR 15 per day. The charge for rehabilitation is EUR 9 per treatment day and the maximum user charge for day surgery is EUR 72 (Åland EUR 54) plus EUR 26, if the patient has to stay overnight. A series of treatments costs EUR 6 per visit (max. 45 times per year).

A ceiling has been introduced for the maximum user charge of EUR 590 (Åland EUR 450) during one calendar year, after which services are free of charge for the rest of the year, with the exception of short-term stays in institutions/hospitals, for which the user charge can be reduced from EUR 26 per day to EUR 12 per day. (Åland from EUR 27 to EUR 15 per day). In Åland, people under 18 years of age do not pay for short-term treatment when the maximum user charge has been reached.

**SWEDEN:** From 1998, the county and regional authorities may set the user charges for admitted patients at various levels, in relation to income levels, and on this basis they can decide to reduce user charges.

*Behandlinger ved sygehuse*

Som det fremgår af skemaet er der ingen brugerbetaling for sygehusophold i Danmark, på Færøerne, i Grønland, Island og Norge. Dog betales der i Island og Norge for ambulant specialistbehandling ved hospitaler, jvf. afsnittet om lægebesøg.

**FINLAND OG ÅLAND:** Patienterne betaler for indlæggelse på hospital og sundhedscentre 26 EUR (Åland 27 EUR), og psykiatrisk afdeling 15 EUR. For korttidsbehandling betales der 12 EUR pr behandlingsdag. Betaling for revalidering er 9 EUR pr behandlingsdag og den maksimale betaling for dagkirurgi er 72 EUR (Åland 54 EUR) plus 26 EUR, hvis der er behov for en overnatning. Seriel behandling koster 6 EUR per besøg (max 45 gange per år).

Der er indført et loft på den maksimale egenbetaling på 590 EUR (på Åland 450 EUR) i løbet af et kalenderår, hvorefter ydelser er gratis resten af året, bortset fra kortvarige institutions/hospitalsophold hvor egenbetalingen kan reduceres fra 26 EUR til 12 EUR pr døgn (Åland fra 27 til 15 EUR per døgn) På Åland betaler personer under 18 år ikke for kortvarig behandling når grænsen for den maksimale egenbetaling er nået.

**SVERIGE:** Fra og med 1998 kan landstingene og regionerne selv fastsætte egenbetalingen for indlagte patienter i forskellige niveauer, baseret på indkomstintervaller, og kan på det grundlag beslutte at nedsætte egenbetalingen.

## ORGANIZATION OF HEALTH SERVICES

The maximum user charge is SEK 80 per day, but the payment varies between treatment boards. Some county and regional authorities differentiate user charges according to income, others according to age or to age and number of treatment days. Some have chosen a flat lower user charge with a ceiling for the size of the amount paid in total.

All county and regional authorities, with the exception of four of them, have agreed that children and young people under the age of 20 years receive free medical treatment (two county authorities have set the age limit for free treatment to the calendar year in which young people reach 19, and two county authorities has set the age limit up to and including 17 years).

Egenbetalingen er højst 80 SEK pr. dag men betalingen varierer mellem behandlingsnævne. Nogle landsting og regioner differentierer egenbetalingen efter indkomst, andre efter alder eller alder og antal behandlingsdage. Nogle har valgt en ensartet, lavere egenbetaling med et loft over den samlede egenbetalings størrelse.

Alle landsting og regioner på nær fire har besluttet at der skal ydes gratis sygdomsbehandling til børn og unge under 20 år (to landsting har fastsat grænsen til det kalenderår hvor de fylder 19 og i to landsting er det gratis til og med 17 år).

### User charges for hospitalization

|               | Are there consistent rules for the whole country? | Size of user charge                                                                        | Deviations                                                                                                                  | User charges in relation to total cost of hospitalization |
|---------------|---------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Denmark       | Yes                                               | -                                                                                          | No                                                                                                                          | -                                                         |
| Faroe Islands | Yes                                               | -                                                                                          | No                                                                                                                          | -                                                         |
| Greenland     | Yes                                               | -                                                                                          | No                                                                                                                          | -                                                         |
| Finland       | Yes                                               | EUR 12 per day in short term care, EUR 26 per day in overnight care for day surgery EUR 72 | Payment for long-term stay according to means. For children 0-17 years max. 7 days                                          | ..                                                        |
| Åland         | Yes                                               | EUR 27, EUR 15 for psychiatric wards EUR 54 for day surgery                                | Payment for long-term stay according to means                                                                               | ..                                                        |
| Iceland       | Yes                                               | -                                                                                          | No                                                                                                                          | -                                                         |
| Norway        | Yes                                               | -                                                                                          | No                                                                                                                          | -                                                         |
| Sweden        | No                                                | SEK 0-80 per day                                                                           | Persons under the age of 40 receiving sickness benefit pay only half the cost for the first 30 days of each sickness period | ..                                                        |

### Egenbetaling for indlæggelse på sygehus

|          | Er der ensartede regler i hele landet? | Egenbetalingens størrelse                                                           | Afvigelser                                                                                                       | Egenbetalingens andel af de samlede udgifter til indlæggelse på sygehus |
|----------|----------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Danmark  | Ja                                     | -                                                                                   | Nej                                                                                                              | -                                                                       |
| Færøerne | Ja                                     | -                                                                                   | Nej                                                                                                              | -                                                                       |
| Grønland | Ja                                     | -                                                                                   | Nej                                                                                                              | -                                                                       |
| Finland  | Ja                                     | 12 EUR pr sengedag for korttidsophold, 26 EUR per dag og for dagkirurgi 72 EUR      | Betaling for langtidsophold efter betalingsevne, for børn 0- 17 år dog max. i 7 dage                             | ..                                                                      |
| Åland    | Ja                                     | 27 EUR, 15 EUR for indlæggelse på en psykiatrisk afdeling og 54 EUR for dagkirurgi. | Betaling for langtidsophold efter betalingsevne                                                                  | ..                                                                      |
| Island   | Ja                                     | -                                                                                   | Nej                                                                                                              | -                                                                       |
| Norge    | Ja                                     | -                                                                                   | Nej                                                                                                              | -                                                                       |
| Sverige  | Nej                                    | 0-80 SEK/dag                                                                        | Personer under 40 år, der modtager sygedagpenge betaler kun det halve i de første 30 dage af hver sygdomsperiode | ..                                                                      |

### *Reimbursement for dental treatment*

**DENMARK:** Reimbursement is provided by the public health insurance scheme. Adults pay between 30 and 65 per cent of the agreed fees. No subsidy is granted for gold restorations and dentures.

In addition, approximately one and a half million Danes are covered by a private insurance scheme, under which charges for both subsidized and non-subsidized treatment may be reimbursed. Municipal and county dental services are regulated by the Dental Health Services Act.

Children and young people under 18 years of age receive free municipal dental care including orthodontic treatment. Children under 16 years of age, who wish to have another treatment service than the one provided free of charge by the municipal council, may – in return for a certain user charge – choose to receive municipal dental services in a private clinic of their own choice, or at a dental clinic in another municipality. Elderly people who live in a nursing home or in their own home with technical aids are offered dental care for which from 1 January 2006 there is a maximum annual charge of DKK 400. In addition, the municipalities provide a subsidy for dentures in cases of impaired function or disfigurement resulting from damage caused by accidents.

The counties offer specialist dental treatment (county dental service) to persons, who because of psychiatric illness or mental handicap, cannot use the existing den-

### *Tilskud til tandbehandling*

**DANMARK:** Tilskuddet til tandbehandling gives fra den offentlige sygesikring. Voksne betaler mellem 30 og 65 pct. af de overenskomstfastsatte betalingstakster. Der ydes ikke tilskud til guldarbejder og proteser.

Derudover er ca. 1,5 million danskere dækket af en privat forsikringsordning, hvorefter der kan opnås tilskud til både behandlinger, som den offentlige sygesikring yder tilskud til, samt til behandlinger, der ikke er dækket af den offentlige sygesikring. Kommunal og amtskommunal tandpleje gives efter reglerne i tandplejeloven.

Der er vederlagsfri kommunal tandpleje, herunder tandregulering, for børn og unge under 18 år. Børn under 16 år, der ønsker et andet behandlingstilbud end det kommunalbestyrelsen vederlagsfrit stiller til rådighed, kan – mod en vis grad egenbetaling – vælge at modtage kommunal tandpleje i privat tandlægepraksis efter eget valg, eller ved en anden kommunes tandklinik. Ældre personer, der bor på plejehjem eller i eget hjem med mange hjælpeforanstaltninger, tilbydes omsorgstandpleje, for hvilken der fra 1. januar 2006 maksimalt opkræves 400 DKK pr. år. Kommunen yder derudover støtte til tandproteser i tilfælde af funktionelt ødelæggende eller vansirende følger af ulykkesbetingede skader.

Amtet tilbyder specialiseret tandpleje (amtstandpleje) til personer, der på grund af sindslidelser eller psykisk udviklingshæmning, ikke kan udnytte de eksisterende

tal services for children and young people, for adults, or for people needing special care. For these services, the county, from 1 January 2006, charges the patient a maximum of DKK 1 480 per year.

In addition, the county offers specialized dental care (county dental service) or highly specialized dental care (in dental research centres) to children and young people with dental conditions that would lead to a permanent functional reduction if left untreated.

In addition, the county grants a special reimbursement for dental care to cancer patients, who either due to radiation of the head and neck, or due to chemotherapy, suffer considerable documented dental problems, and to persons who due to Sjögrens syndrome suffer considerable documented dental problems. From 1 January 2006, for these services the county may charge a user payment of a maximum of DKK 1 480 annually. Finally, the counties provide highly specialized dental advice, examination and treatment (in dental research centres) for patients with rare diseases and handicaps, for whom the underlying condition can lead to special problems with their teeth, mouth or jaws.

Oral and maxillo-facial surgery is carried out in the hospitals and is paid for by the counties in accordance with the legislation relating to hospitals.

In addition to the general rules outlined above, the municipalities can provide support for necessary dental treatment in accordance with the legislation relating to social services.

de tandplejetilbud i børne- og ungdomstandplejen, voksentandplejen eller i omsorgstandplejen. For disse ydelser kan amtet fra 1. januar 2006 opkræve en egenbetaling på maksimalt 1 480 DKK årligt.

Amtet tilbyder endvidere specialiseret tandpleje (amtstandpleje) eller højt specialiseret tandpleje (i odontologisk landsdels- og videnscenter) til børn og unge med odontologiske lidelser, der ubehandledede medfører varig funktionsnedsættelse.

Amtet yder herudover et særligt tilskud til tandpleje for kræftpatienter, der enten på grund af strålebehandling i hoved og halsregion eller på grund af kemoterapi har betydelige dokumenterede tandproblemer samt til personer, der på grund af Sjögrens Syndrom har betydelige dokumenterede tandproblemer. For disse ydelser kan amtet fra 1. januar 2006 opkræve en egenbetaling på maksimalt 1 480 DKK årligt. Endeligt yder amtet højt specialiseret odontologisk rådgivning, udredning og behandling (i odontologisk landsdels- og videnscenter) af patienter med sjældne sygdomme og handicap, hos hvem den tilgrundliggende tilstand giver anledning til specielle problemer i tænder, mund og kæbe.

Tand-, mund- og kæbekirurgisk behandling udføres på sygehusene og betales af amterne efter sygehuslovgivningen.

Ud over ovennævnte generelle regler kan kommunerne yde støtte til nødvendig tandbehandling i henhold til den sociale lovgivning.

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**FAROE ISLANDS:** Dental treatment is mainly provided by privately practising dentists. Payment is therefore partly private, and partly subsidized by the health insurance scheme. The subsidy amounts to about half of the total cost of dental treatment for adults.

The municipalities provide a free dental service for children up to the age of 16. This service also provides special dental care, such as orthodontic treatment.

Reimbursement of expenses for treatment of congenital diseases or disease-related dental conditions can be claimed according to social legislation.

**GREENLAND:** All public dental care is free of charge. Outside the dentist's normal working hours, he or she may offer treatment against payment.

**FINLAND:** A basic fee of EUR 7 per visit (EUR 11 for a visit to a specialist) is charged for dental treatment at a health centre. In addition to this, user fees of EUR 5-130 can be charged, dependent on the type of treatment provided.

The health insurance scheme reimburses 60 per cent of the treatment costs within the rates fixed by the Social Insurance Institution for one annual dental examination in the private dental service. Orthodontic treatment is only reimbursed if the treatment is necessary to prevent other illnesses. Expenditure on dentures and dental laboratory costs are not included in the reimbursement scheme.

Expenses for laboratory and X-ray examinations ordered by a dentist are refundable. Expenses for drugs prescribed by a dentist and travelling costs to visit a

**FÆRØERNE:** Tandbehandlingen foregår hovedsageligt hos privatpraktiserende tandlæger. Betalingen herfor er delvis privat og delvis tilskud (ca. halvdelen) fra sygekassen.

Der findes i kommunalt regi en gratis skoletandplejeordning til børn under 16 år. Denne ordning omfatter også specialtandpleje, så som tandretning.

Til behandling af medfødte eller sygdomsforårsagende tandlidelser, kan der søges om dækning af udgifterne over sociallovgivningen.

**GRØNLAND:** Al offentlig tandpleje er gratis. Udenfor tandlægens arbejdstid, kan denne tilbyde behandling mod betaling.

**FINLAND:** Der betales et grundbeløb for tandbehandling ved sundhedscentrene på 7 EUR per besøg (hos specialtandlæger 11 EUR per besøg). Ud over grundbeløbet kan der opkræves en egenbetaling på 5-130 EUR, afhængig af undersøgelsens omfang.

Sygeforsikringen giver et tilskud på 60 pct. af behandlingsudgifterne indenfor de af Folkpensionsanstalten fastsatte takster til en årlig tandlægeundersøgelse i den private sektor. Der gives kun tilskud til tandregulering hvis dette er nødvendigt for at undgå andre sygdomme. Udgifter til proteser og tandtekniske foranstaltninger er ikke omfattet af tilskudssystemet.

Udgifterne til laboratorie- og røntgenundersøgelser rekvireret af en tandlæge, receptudskrivning samt rejseudgifter ved tandlægebesøg kan refunderes efter de

dentist, are refundable under the same terms as for medical prescriptions and travelling costs to visit a physician.

**ÅLAND:** All public dental treatment for persons under 18 years of age is free of charge. For others, the cost of a dental visit is EUR 8 with additional standard fees for items of treatment and examinations. The patient pays the actual cost of orthodontic treatment and prosthetic treatment. The same rules as in Finland apply for treatment with private dentists.

**ICELAND:** The national dental health insurance system in Iceland pays according to a public fee schedule set by the Minister of Health. These fees are generally different from the fees used by private dental practitioners, since private dentists in Iceland are allowed to set their own fees.

The national dental health insurance scheme offers partial reimbursement of the cost of dental treatment for children under 18 and adults aged 67 years or older. For children under 18, 75 per cent (according to the public fee schedule) of the cost of most dental treatment is reimbursed with the exception of gold crowns, bridges and orthodontic treatment.

The cost of orthodontic treatment can be reimbursed up to ISK 150 000 according to special rules. People with chronic illnesses, old-age pensioners and disability pensioners also have their costs covered in full or in part.

For this group 50, 75 or 100 per cent of the cost (according to the public fee-schedule) of dental treatment may be covered. Full dentures and partial dentures are covered. Gold and porcelain

samme regler som for recepter udskrevet af læger og rejseudgifter ved lægebesøg.

**ÅLAND:** Al offentlig tandbehandling for personer under 18 år er gratis. For andre koster et besøg 8 EUR med tillæg for udgifter til de enkelte foranstaltninger og undersøgelser efter særlige takster. For tandregulering og proteser betales de faktiske udgifter. For besøg hos private tandlæger gælder de samme regler som i Finland.

**ISLAND:** Sygeforsikringen i Island betaler med en takst for tandbehandling som er bestemt af sundhedsministeren. Den takst er sædvanligvis forskellig fra den takst som de private tandlæger bruger, fordi de har lov til at fastsætte deres egen pris.

Sygeforsikringen yder refusion til en del af tandbehandling for børn i alderen under 18 år og pensionister 67 år og ældre. For børn yngre end 18, ydes der 75 pct. (af sygeforsikringens takst) til deres tandbehandling bortset fra guld- og porcelænskroner, broer og tandregulering.

Tandregulering kan refunderes med op til 150 000 ISK med specielle regler. Langtidssyge samt alders- og invalidepensionister får ligeledes dækket deres udgifter helt eller delvist.

Der kan til denne gruppe ydes 50, 75 eller 100 pct. dækning af udgifterne til tandbehandling (af sygeforsikringens takst). Helproteser og delproteser er dækket. Guld- og porcelænskroner eller

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crowns or bridges and implants can be reimbursed up to ISK 80 000 per year.

The cost of implants for use with attachments under dentures is partially reimbursed for pensioners who cannot use full dentures due to ridge resorption or other problems.

The cost of dental treatment (including orthodontic treatment), for congenital malformations and serious abnormalities such as cleft palate and aplasia, and the cost of dental treatment necessary because of accidents and illness, is reimbursed according to special rules. Dental treatment is not subsidized for the rest of the population. No private dental insurance is available either.

**NORWAY:** Adults over 20 years of age mainly pay for their own dental treatment. Prices for general dental practitioner services are not regulated. Dental treatment, except for orthodontic treatment, is free of charge for young people under the age of 18 years and all mentally handicapped people. Elderly people, people with chronic illnesses and disabled people who are either living in institutions or who receive home nursing services also receive free dental treatment from the public dental service.

Adolescents 19-20 years of age receive subsidized dental care. The county authorities cover a minimum of 75 per cent of the cost of dental treatment for this group.

The National Insurance Scheme covers part of the cost of necessary orthodontic treatment for children up to the age of 18.

broer og implantater kan refunderes med op til 80 000 ISK per år.

Implantater er også inkluderet for dem som ikke kan bruge en helprotese. Der ydes delvis tilskud til pensionister som ikke kan anvende helprotese på grund af dårlig resorbering eller andre problemer.

For behandling (inkl. ortodonti) af medfødte misdannelser, større anomalier som fx ganespalte, samt for aplasier, ulykker og sygdom betales efter særlige regler. Der ydes ikke tilskud til tandbehandling for den øvrige del af befolkningen. Der findes heller ikke privat forsikring for tandbehandling.

**NORGE:** Voksne over 20 år betaler normalt selv for tandbehandling. Der er fri prisfastsættelse hos privatpraktiserende tandlæger. Tandbehandling, bortset fra tandregulering, er gratis for unge under 18 år og alle psykisk udviklingshæmmede. Ældre, kronisk syge og handicappede der enten bor på institution eller er modtagere af hjemmesygepleje, modtager også gratis behandling fra det offentlige tandplejesystem.

Unge i alderen 19 – 20 år modtager tandbehandling med refusion. Amterne (fylkene) betaler mindst 75 procent af udgifterne til behandling for denne aldersgruppe.

Folketrygden dækker dele af udgifterne ved nødvendig kæbekirurgisk behandling for børn op til 18 år.

The National Insurance Scheme provides reimbursement for dental treatment when a specified medical condition, or treatment of the condition, has led to reduced oral health.

Patients with a rare medical condition can also receive reimbursement for dental treatment from the National Insurance Scheme.

It is also possible to receive reimbursement for the cost of treatment to replace teeth that have been lost as a result of periodontal disease.

**SWEDEN:** Dental treatment is free for children and young people under the age of 20 years.

All persons aged 20 years or more pay part of the cost for conservative treatment. The rest of the cost is paid by the state directly to the dentist. Dental fees are not regulated, which means that dentists decide the cost of the various types of treatment themselves. It is also possible to have a two-year contract for treatment at a fixed price. For persons 65 years or more the cost of prosthetic treatment is limited to SEK 7 700 plus the cost of materials. The dental treatment insurance pays the rest of the cost of treatment directly to the dentist. Reimbursement for dental treatment from a private dentist is limited to the public fees set by the county.

Persons who need extensive dental care as a result of diseases or disability are given a subsidy from the dental treatment insurance that is twice the amount of that normally given for conservative treatment.

Folketrygden giver tilskud til tandbehandling når en bestemt lidelse, eller behandling af denne lidelse, har ført til en dårligere tandsundhed.

Patienter med sjældne medicinske sygdomme kan også få tilskud til tandbehandling fra Folketrygden.

Det er også muligt at få tilskud til erstatning af tænder der er gået tabt på grund af periodontitis.

**SVERIGE:** Børn og unge under 20 år har gratis tandbehandling.

Alle personer som er 20 år eller ældre betaler en del af tandlægeregningen for den bevarende behandling. Det resterende beløb betales direkte til tandlægen af staten. Der er fri prisdannelse på tandbehandling hvilket medfører at tandlægerne selv bestemmer prisen for de enkelte behandlingstyper. Det er også muligt at indgå en toårig aftale om behandling til fast pris. For personer på 65 år eller ældre er udgifter til proteser fastsat til maksimalt 7 700 SEK plus udgifter til materialer. Forsikringen for tandbehandling betaler det resterende beløb direkte til tandlægen. For privatpraktiserende er tilskuddet begrænset til det offentliges takster i lenet.

Personer som har behov for udvidet tandpleje som følge af sygdomme eller handicap gives der et tilskud fra tandbehandlingsforsikringen som er dobbelt så højt som den man normalt giver til den bevarende tandbehandling.

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In addition to providing free dental treatment for children and young persons, the county and regional authorities are responsible for:

- Oral surgery carried out in hospitals
- Dental treatment that is a part of the treatment of disease over a limited period of time
- Dental treatment for certain elderly or disabled people who have difficulties maintaining their oral hygiene.

For patients belonging to one of the above groups, the same rules for user charges apply as for general outpatient medical treatment, i.e. a maximum of SEK 900 for a twelve-month period.

### *Maximum charges*

**DENMARK AND GREENLAND:** There are no rules in Denmark for maximum user charges, with the exception of pharmaceutical products.

**FAROE ISLANDS:** Apart from pharmaceutical products and dental treatment, there are no user charges in the Faroe Islands (see the sections on reimbursement for pharmaceutical products and reimbursement for dental treatment).

**FINLAND:** If the total cost of pharmaceutical products exceeds EUR 616.72 per year, or if travelling costs for treatment exceed EUR 157.25 per year the Social Insurance Institution reimburses the excess costs. If a person's ability to pay taxes is reduced because of sickness, a special tax relief may be granted. The amount of the tax relief is

Ud over gratis tandbehandling til børn og unge har landstingene og regionerne ansvaret for:

- Kirurgisk tandbehandling som udføres ved et sygehus
- Tandbehandling der er led i en sygdomsbehandling i en begrænset periode
- Tandbehandling til visse ældre og handicappede som har svært ved at klare mundhygiejne.

For patienter som hører til en af ovennævnte grupper gælder samme egenbetalingsregler som i den ambulante almene sygdomsbehandling, dvs. højst 900 SEK for en tolv måneders periode.

### *Maksimal egenbetaling*

**DANMARK OG GRØNLAND:** Der findes ingen regler om maksimal egenbetaling med undtagelse for medicin i Danmark.

**FÆRØERNE:** Bortset fra medicin og tandpleje er der ingen tvungen egenbetaling på Færøerne (se afsnit om tilskud til lægemidler og tilskud til tandbehandling).

**FINLAND:** Hvis den maksimale egenbetaling for medicin udgør 616,72 EUR pr. år og hvis udgifterne til transport i forbindelse med behandling overstiger 157,25 EUR pr. år vil Folkpensionsanstalten dække det overskydende beløb. Hvis evnen til at betale skat er nedsat på grund af sygdom gives der en særlig skattelettelse. Skattelettelsens størrelse beregnes i for-

calculated on the basis of the person's and his/her family's ability to pay taxes.

User charges for a long-term stay in an institution or a hospital cannot exceed 80 per cent of a patient's/resident's net income. However, a patient shall have at least EUR 80 per month for personal necessities. The same charge is payable in all kinds of institutions within the social and health care sectors.

The so-called user charge ceiling of EUR 590 is applied by the municipal social and welfare sectors. Once the ceiling for the present calendar year is exceeded, the user may generally utilize services free of charge. The ceiling applies to physician services in the primary health care sector, physiotherapy, outpatient treatment, day surgery and short-term stays in institutions in the social and health sectors. Dental care, patient transport, certificates, laboratory tests and radiological examinations requisitioned by privately practising physicians must still be paid for. Income regulated payments are not included in the maximum amount. Payments made for children under 18 years of age are added to the amount paid by the person who has paid the costs.

**ÅLAND:** The rules for maximum user charges for medicines and transport to and from treatment are the same as in Finland. For treatment of illness, there is a maximum user charge for medical visits and outpatient treatment of no more than EUR 450 during one calendar year, after which all services are free of charge for the remaining part of the year, with the exception of short-term stays in institutions/hospitals, for which the charge is reduced from EUR 27 per day to EUR 15 per day. The maximum charge for people over 18 years of age with low income is

hold til den pågældendes eller dennes families muligheder for at betale skat.

Egenbetalingen for langtidsophold på institution/hospital kan højest udgøre 80 pct. af patientens/beboerens nettoindkomst. Dog skal patienten have mindst 80 EUR per måned til personlige fornødenheder. Det er den samme betaling som opkræves på alle typer af institutioner indenfor social- og sundhedssektoren.

Det såkaldte udgiftsloft på 590 EUR er taget i anvendelse for det kommunale social- og sundhedsvæsen. Når loftet i kalenderåret overskrides kan den pågældende i det store og hele benytte tilbuddene uden betaling. Loftet omfatter lægeydelser i den primære sektor ved helsecentre, fysioterapi, behandlingsforløb, besøg i ambulatorium, dagkirurgi samt korttidsinstitutionsoophold indenfor social- og sundhedsvæsenet. Der betales fortsat for tandbehandling og sygetransport, attester, laboratorieundersøgelser og radiologiske undersøgelser som udføres efter henvisning fra en privatpraktiserende læge. Indkomstregulerede betalinger medregnes ikke i maksimumsbeløbet. Betaling for børn under 18 år medregnes i maksimumsbeløbet hos den der har betalt for det.

**ÅLAND:** Reglerne for den maksimale egenbetaling for medicin og transport til og fra behandling er den samme som i Finland. Ved sygdomsbehandling er der en maksimal egenbetaling ved lægebesøg og ambulant behandling på højest 450 EUR i løbet af et kalenderår hvorefter al service er gratis den resterende del af året med undtagelse af kortvarige institutions/hospitalsoophold hvor betalingen reduceres fra 27 EUR pr døgn til 15 EUR pr døgn. For personer med lav indkomst over 18 år er den maksimale egenbetaling 225 EUR. For børn og unge under

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EUR 225. The maximum charge for children and young people under 18 years of age is EUR 200 per calendar year, after which all treatment included in the maximum user charge scheme is free, including hospital treatment. As part of the maximum user charge, payment for out-patient treatment and services received outside the county are also included. Dental treatment, treatment in hospital departments, and x-ray and laboratory examinations are not included. User charges may be deducted from municipal tax.

**ICELAND:** Within the present system, user charges are reimbursed for people aged 18-70 years of age, if the costs exceed ISK 18 000. during one calendar year. The same applies to children under 18 if charges exceed ISK 6 000 User charges exceeding ISK 4 500 are reimbursed for the following groups: 60-70 year-old senior citizens receiving a full basic pension, senior citizens 70 years and older, disabled persons, and persons who have been continually unemployed for 6 months or longer.

If there are one or more children under the age of 18 in one family, they count as one person in relation to the cost ceiling.

When the cost ceiling has been reached, an insured person receives a discount card, which guarantees full or partial reimbursement for the rest of the year, according to certain rules.

The cost ceiling scheme covers the following services: consultation with a general medical practitioner or a specialist, home visit by a physician, out-patient treatment in a hospital or a casualty department, and laboratory examinations and X-ray treatment. The scheme does not cover treatment for in vitro fertilization.

18 år er den maksimale egenbetaling 200 EUR per kalenderår hvorefter al behandling der indgår under den maksimale egenbetaling er gratis, inklusiv behandling på en hospitalsafdeling. Til den maksimale egenbetaling medregnes også betaling for ambulant behandling og ydelser som er modtaget uden for landskabet. Derimod medregnes bl.a. tandbehandling, behandling på hospitalsafdelinger, røntgen- og laboratorieundersøgelser ikke. Egenbetalingen kan fratrækkes i kommuneskatten.

**ISLAND:** I det nuværende system refunderes egenbetalingen for personer i alderen 18-70 år, hvis den i løbet af ét kalenderår overstiger 18 000 ISK. Det samme gælder for børn under 18 år hvis egenbetalingen overstiger 6 000 ISK. For følgende grupper refunderes egenbetalingen hvis den overstiger 4500 ISK pr. år: Pensionister 60-70 år med fuld grundpension, pensionister 70 år og ældre, handicappede og personer, der har været arbejdsløse uafbrudt i 6 måneder eller længere.

Hvis der er ét eller flere børn under 18 år i samme familie, regnes de som én person i forhold til udgiftsloftet.

Når udgiftsloftet er nået, vil den sikrede få tildelt et rabatkort, som indebærer fuld eller delvis refusion for egenbetalingen i resten af året efter visse nærmere fastsatte regler.

Ordningen om udgiftsloft omfatter følgende ydelser: Besøg hos alment praktiserende læge eller speciallæge, besøg af læge i hjemmet, ambulant behandling på hospitaler og skadestuer, samt laboratorieundersøgelser og røntgenbehandling. Ordningen omfatter ikke behandling for in vitro fertilisering.

**NORWAY:** Under the present scheme, reimbursement is granted for charges that exceed a certain annual amount.

User charges for the services that are included in the cost ceiling arrangement are noted on a card. When the cost ceiling is reached, patients receive a card granting them full reimbursement from the National Insurance Scheme for the rest of the year. The cost ceiling for one of the parents extends to children under the age of 16. No user charges are levied for children under the age of 7.

There are two separate reimbursement schemes in Norway.

The following services are included in reimbursement scheme 1:

- Examination and treatment by a doctor or psychologist
- Necessary pharmaceutical products (products prescribed on "blue prescription")
- Travel costs that are paid for by the National Insurance Scheme.

The following services are included in reimbursement scheme 2:

- Examination and treatment by a dentist for certain specified diseases
- Certain physiotherapy services
- Certain stays in approved training institutions
- Travel abroad for treatment under the auspices of Rikshospitalet University Hospital.

In 2006, the cost ceiling for reimbursement scheme 1 was NOK 1 615 and for re-imbursement scheme 2 NOK 2 500.

**NORGE:** I det nuværende system ydes der refusion for egenbetaling, hvis denne overstiger et vist beløb årligt.

Egenbetalingen for de ydelser, der er omfattet af ordningen om udgiftsloft, noteres på et kvitteringskort. Når udgiftsloftet er nået, tildeles patienten et frikort, hvorefter Folketrygden yder fuld refusion for udgifterne i resten af året. Børn og unge under 16 år er omfattet af udgiftsloftet hos én af forældrene. Børn under 7 år er fritaget for egenbetaling.

Der er to helt adskilte egenandelsordninger i Norge.

Følgende ydelser indgår i egenandelsloft nr. I:

- Undersøgelse og behandling hos læge eller psykolog
- Vigtige lægemidler (på "blå recept")
- Rejser, som Folketrygden betaler for.

Følgende ydelser indgår i egenandelsloft nr. II:

- Undersøgelser og behandling hos tandlæge for visse specificerede sygdomme
- Refusionsberettiget fysioterapi
- Visse ophold ved godkendte genoptræningsinstitutioner
- Behandlingsrejser til udlandet (klima-rejser) i regi af Rigshospitalet.

Egenandelsloftet for 2006 for egenandelsloft I er 1.615 NOK og for egenandelsloft II 2.500 NOK.

## ORGANIZATION OF HEALTH SERVICES

**SWEDEN:** From 1 January 1997, special maximum user charges for general medical treatment and pharmaceutical products were introduced.

The user charges for a consultation with a general medical practitioner or a specialist, for medical treatment and for articles used for incontinence are added up. If the user charges, over a 12-month period, together exceed SEK 900 (or a lower amount fixed by the county authority), a card entitling the holder to exemption from charges is issued. The card is valid for the remaining part of the period.

If user charges for prescribed pharmaceutical products exceed SEK 1 800, a card entitling the holder to free medication is issued. The card allows the person to buy pharmaceutical products free of charge for the remaining part of the 12-month period.

If one of the parents or both parents have several children under the age of 18 years, the children are exempt from paying user charges when the total purchase of pharmaceutical products for them exceeds the fixed maximum user charge. Some county and regional authorities have also determined a maximum user charge for patient transport.

**SVERIGE:** Siden 1. januar 1997 har der været særskilte takster for maksimal egenbetaling for almindelig lægebehandling og lægemidler.

Egenbetalingen for konsultationer hos almenmedicinsk læge eller specialist, for medicinsk behandling og for artikler, der anvendes ved inkontinens, sammentæles. Hvis den samlede egenbetaling over en 12-måneders periode overstiger 900 SEK (eller et lavere beløb, fastsat af Landstinget), udstedes der et frikort. Frikortet gælder for den resterende del af perioden.

Hvis egenbetalingen for lægemidler på recept overstiger 1 800 SEK, udstedes et frikort. Frikortet giver ret til køb af lægemidler uden egenbetaling i den resterende del af 12-måneders perioden, regnet fra det første lægemiddelindkøb.

Hvis én eller begge forældre tilsammen har flere børn under 18 år, er børnene fritaget for egenbetaling såfremt lægemiddelindkøbet til dem samlet overstiger det fastlagte maksimum for egenbetaling. Nogle landsting og regioner har også fastsat regler om maksimal egenbetaling for sygetransport.

## CHAPTER II

# Population and fertility

## *Befolkning og fertilitet*

|                                                                         |                                                                          |    |
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| • <a href="#">Introduction</a>                                          | • <a href="#">Indledning</a>                                             | 74 |
| • <a href="#">Population and population trends</a>                      | • <a href="#">Befolkning og befolkningsudvikling</a>                     | 74 |
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## Introduction

This chapter begins with a general description of the population in the Nordic countries and trends in population development followed by a more detailed description of fertility, births, infant mortality and contraceptive methods.

### 2.1 Population and population trends

The population structure varies somewhat between the Nordic countries, Sweden having the oldest and Greenland the youngest population.

The development in population growth varies somewhat between the Nordic countries. The natural increase has been greatest in Iceland, the Faroe Islands and Greenland throughout the period. Sweden and Åland have the lowest natural increase. In 2004, net migration contributed to population growth in all the Nordic countries with the exception of Greenland and the Faroes Islands.

Life expectancy in the Nordic countries has increased significantly, and even though women live longer, the difference between the life expectancies of men and women has been reduced.

## Indledning

I dette kapitel gives der først en generel beskrivelse af befolkningen i de nordiske lande, efterfulgt af en nærmere beskrivelse af fertilitet, fødsler, spædbørnsdødelighed og prævention.

### 2.1 Befolkning og befolkningsudvikling

Sammensætningen af befolkningen er noget forskellig fra land til land. Sverige har den ældste og Grønland den yngste befolkning.

Udviklingen i befolkningstilvæksten varierer en del de nordiske lande imellem. Fødselsoverskuddet har hele perioden igennem været størst i Island, Færøerne og Grønland. Sverige og Åland har det laveste fødselsoverskud. I 2004 bidrager nettomigrationen til en befolkningsforøgelse med undtagelse af Grønland og Færøerne.

Den forventede levetid i Norden er forøget markant, og selv om kvinder generelt lever længst, er forskellene mellem mænds og kvinders forventede levetid blevet reduceret.

Figure 2.1.0 Mean population by sex and age as a percentage of the total population  
2004

Middelfolketallet efter køn og alder i pct. af hele befolkningen 2004

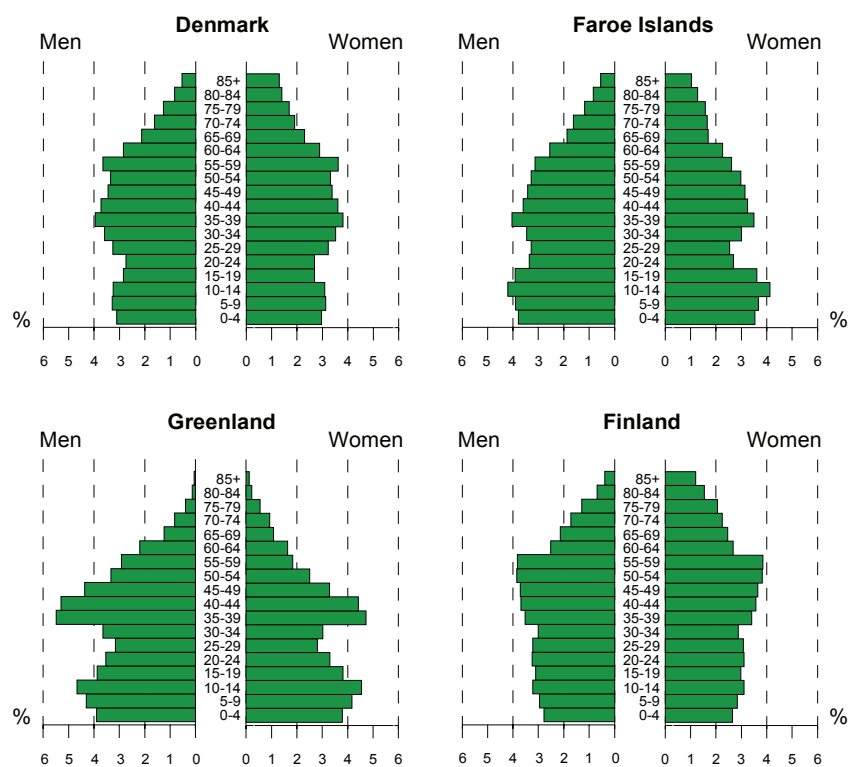
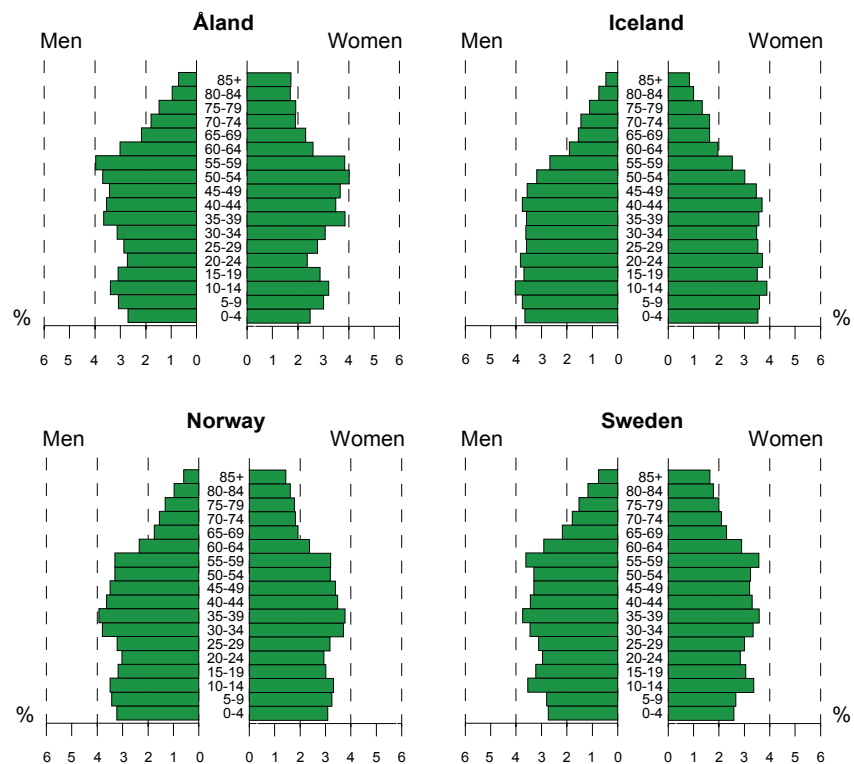
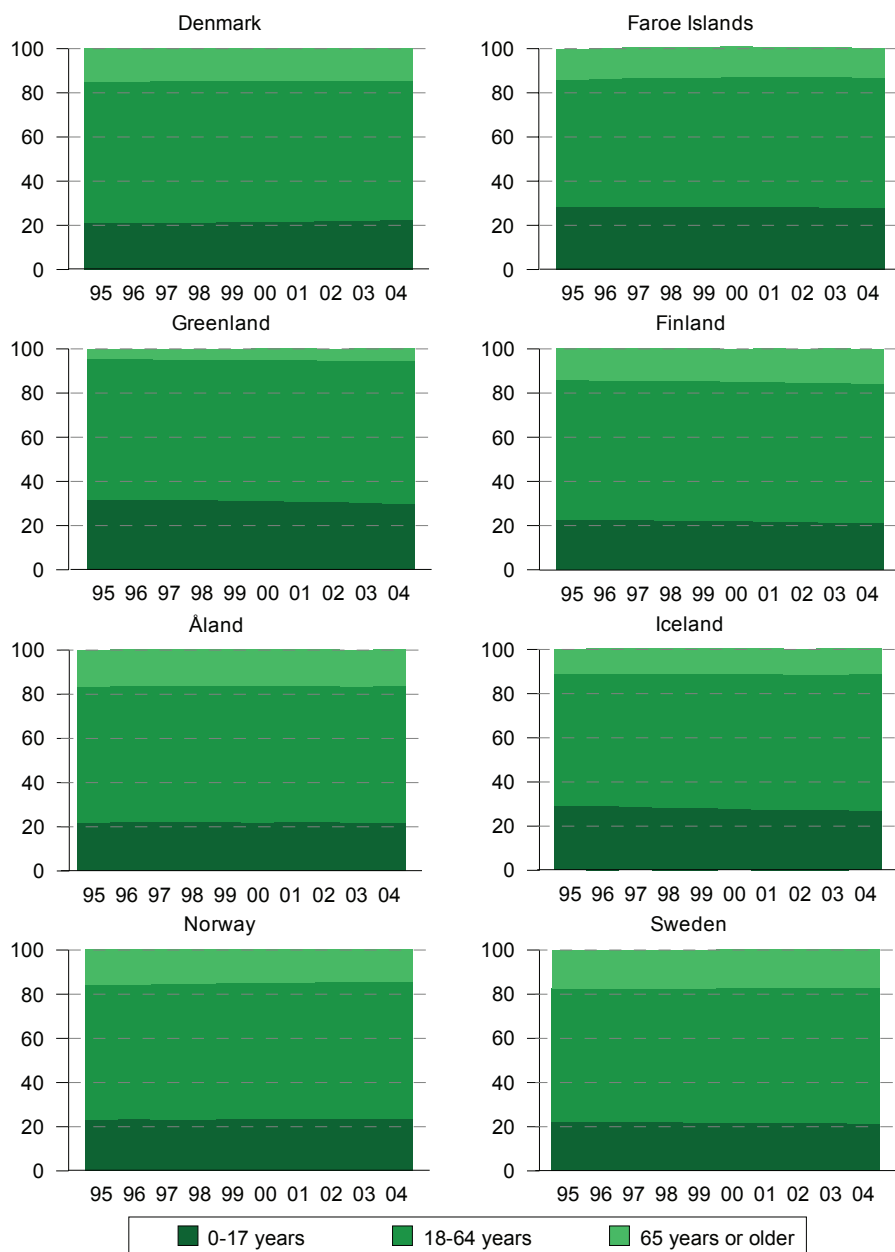


Figure 2.1.0 ... continued  
... fortsat



**Figure 2.1.1 Mean population by age groups 1995-2004 per cent**  
 Middelfolketallet fordelt på aldersgrupper 1995-2004 procent



## POPULATION AND FERTILITY

**Table 2.1.1 Mean population 1995-2004**  
Middelfolketallet 1995-2004

|                      | Denmark | Faroe Islands | Greenland | Finland | of which Åland | Iceland | Norway | Sweden |
|----------------------|---------|---------------|-----------|---------|----------------|---------|--------|--------|
| (1 000)              |         |               |           |         |                |         |        |        |
| <i>Men</i>           |         |               |           |         |                |         |        |        |
| Mænd                 |         |               |           |         |                |         |        |        |
| 1995                 | 2 580   | 23            | 30        | 2 487   | 12             | 134     | 2 155  | 4 361  |
| 2000                 | 2 639   | 24            | 30        | 2 526   | 13             | 141     | 2 224  | 4 386  |
| 2003                 | 2 665   | 25            | 30        | 2 553   | 13             | 145     | 2 263  | 4 437  |
| 2004                 | 2 672   | 25            | 30        | 2 557   | 13             | 147     | 2 277  | 4 456  |
| <i>Women</i>         |         |               |           |         |                |         |        |        |
| Kvinder              |         |               |           |         |                |         |        |        |
| 1995                 | 2 648   | 21            | 26        | 2 621   | 13             | 133     | 2 204  | 4 466  |
| 2000                 | 2 700   | 22            | 26        | 2 650   | 13             | 140     | 2 267  | 4 486  |
| 2003                 | 2 723   | 23            | 26        | 2 667   | 13             | 145     | 2 302  | 4 521  |
| 2004                 | 2 729   | 23            | 27        | 2 671   | 13             | 146     | 2 315  | 4 537  |
| <i>Men and women</i> |         |               |           |         |                |         |        |        |
| Mænd og kvinder      |         |               |           |         |                |         |        |        |
| 1995                 | 5 229   | 44            | 56        | 5 108   | 25             | 267     | 4 359  | 8 827  |
| 2000                 | 5 340   | 46            | 56        | 5 176   | 26             | 281     | 4 491  | 8 872  |
| 2003                 | 5 387   | 48            | 57        | 5 220   | 26             | 289     | 4 565  | 8 958  |
| 2004                 | 5 401   | 48            | 57        | 5 228   | 26             | 293     | 4 592  | 8 993  |

Sources: The central statistical bureaus: D: Statistics Denmark; FI: Statistics Faroe Islands; G: Statistics Greenland; F & Å: Statistics Finland; I: Statistics Iceland; N: Statistics Norway; S: Statistics Sweden  
Kilder: De statistiske centralbureauer: D: Danmarks Statistik; FI: Hagstova Føroya; G: Grønlands Statistik; F & Å: Statistikcentralen; I: Hagstofa Íslands; N: Statistisk sentralbyrå; S: Statistiska centralbyrån

**Table 2.1.2 Vital statistics per 1 000 inhabitants 1995-2004**

Befolkningens bevægelser pr. 1 000 indbyggere 1995-2004

|                      | <i>Live births</i><br>Levendefødte | <i>Deaths</i><br>Døde | <i>Natural increase</i><br>Fødselsoverskud | <i>Net migration</i><br>Nettomigration | <i>Population increase</i><br>Befolkningstilvækst |
|----------------------|------------------------------------|-----------------------|--------------------------------------------|----------------------------------------|---------------------------------------------------|
| <b>Denmark</b>       |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 13.3                               | 12.1                  | 1.3                                        | 5.5                                    | 6.7                                               |
| 2000                 | 12.6                               | 10.9                  | 1.7                                        | 1.8                                    | 3.5                                               |
| 2003                 | 12.0                               | 10.7                  | 1.3                                        | 1.2                                    | 2.5                                               |
| 2004                 | 12.0                               | 10.3                  | 1.6                                        | 0.9                                    | 2.5                                               |
| <b>Faroe Islands</b> |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 14.7                               | 8.3                   | 6.4                                        | -13.4                                  | -7.0                                              |
| 2000                 | 15.1                               | 7.7                   | 7.5                                        | 9.6                                    | 17.1                                              |
| 2003                 | 14.7                               | 8.5                   | 6.2                                        | 4.8                                    | 10.6                                              |
| 2004                 | 14.8                               | 7.9                   | 6.9                                        | -3.1                                   | 3.8                                               |
| <b>Greenland</b>     |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 20.1                               | 8.7                   | 11.4                                       | -8.3                                   | 3.1                                               |
| 2000                 | 15.8                               | 8.1                   | 7.7                                        | -3.6                                   | 4.1                                               |
| 2003                 | 15.8                               | 8.5                   | 7.3                                        | -5.4                                   | 1.9                                               |
| 2004                 | 15.7                               | 8.5                   | 7.2                                        | -5.4                                   | 1.8                                               |
| <b>Finland</b>       |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 12.3                               | 9.6                   | 2.7                                        | 0.6                                    | 3.3                                               |
| 2000                 | 11.0                               | 9.5                   | 1.4                                        | 0.5                                    | 1.9                                               |
| 2003                 | 10.9                               | 9.4                   | 1.5                                        | 1.1                                    | 2.6                                               |
| 2004                 | 11.0                               | 9.1                   | 1.9                                        | 1.3                                    | 3.2                                               |
| <b>Åland</b>         |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 13.4                               | 10.2                  | 3.2                                        | -2.3                                   | 0.9                                               |
| 2000                 | 10.0                               | 9.6                   | 0.4                                        | 2.3                                    | 2.7                                               |
| 2003                 | 10.0                               | 10.2                  | -0.2                                       | 3.8                                    | 3.5                                               |
| 2004                 | 10.6                               | 9.9                   | 0.7                                        | 6.5                                    | 7.3                                               |
| <b>Iceland</b>       |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 16.0                               | 7.2                   | 8.8                                        | -5.3                                   | 3.7                                               |
| 2000                 | 15.3                               | 6.5                   | 8.8                                        | 6.1                                    | 15.3                                              |
| 2003                 | 14.3                               | 6.3                   | 8.0                                        | -0.5                                   | 7.3                                               |
| 2004                 | 14.5                               | 6.2                   | 8.2                                        | 1.8                                    | 10.0                                              |
| <b>Norway</b>        |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 13.8                               | 10.4                  | 3.5                                        | 1.5                                    | 4.9                                               |
| 2000                 | 13.2                               | 9.8                   | 3.4                                        | 2.2                                    | 5.6                                               |
| 2003                 | 12.4                               | 9.3                   | 3.1                                        | 2.5                                    | 5.5                                               |
| 2004                 | 12.4                               | 9.0                   | 3.4                                        | 2.9                                    | 6.3                                               |
| <b>Sweden</b>        |                                    |                       |                                            |                                        |                                                   |
| 1995                 | 11.7                               | 10.6                  | 1.1                                        | 1.4                                    | 2.4                                               |
| 2000                 | 10.2                               | 10.5                  | -0.3                                       | 2.8                                    | 2.4                                               |
| 2003                 | 11.1                               | 10.4                  | 0.7                                        | 3.2                                    | 3.9                                               |
| 2004                 | 11.2                               | 10.1                  | 1.2                                        | 2.8                                    | 4.0                                               |

Sources: The central statistical bureaux  
 Kilder: De statistiske centralbureauer

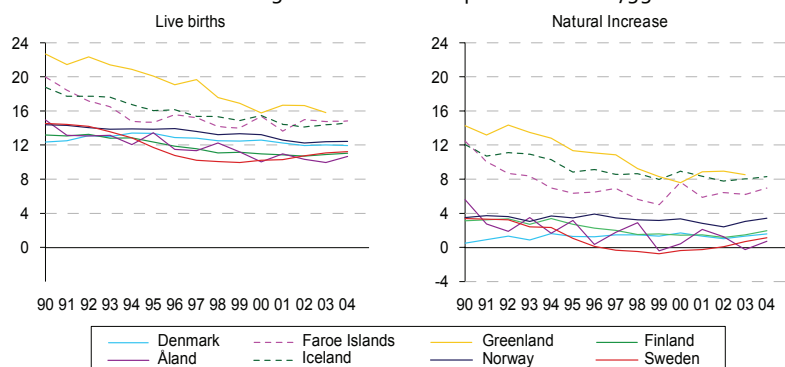
## POPULATION AND FERTILITY

**Table 2.1.3 Average life expectancy 1996-2004**  
Middellevetiden 1996-2004

| Age           | Men  |      |      |      |     | Women |      |      |      |     |
|---------------|------|------|------|------|-----|-------|------|------|------|-----|
|               | 0    | 15   | 45   | 65   | 80  | 0     | 15   | 45   | 65   | 80  |
| Denmark       |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 73.8 | 59.4 | 31.1 | 14.8 | 6.6 | 78.7  | 64.2 | 35.1 | 18.0 | 8.4 |
| 2002/03       | 74.9 | 60.4 | 31.9 | 15.5 | 6.8 | 79.5  | 65.0 | 35.7 | 18.4 | 8.5 |
| 2003/04       | 75.2 | 60.7 | 32.1 | 15.7 | 6.9 | 79.9  | 65.4 | 36.1 | 18.7 | 8.7 |
| Faroe Islands |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 75.2 | 60.7 | 32.2 | 15.5 | 7.0 | 81.4  | 66.8 | 37.4 | 19.4 | 8.8 |
| 2000-04       | 77.1 | 62.5 | 33.7 | 16.9 | 7.4 | 81.5  | 66.7 | 37.6 | 19.7 | 8.7 |
| Greenland     |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 62.8 | 50.3 | 26.2 | 11.1 | 5.0 | 68.0  | 55.0 | 27.6 | 12.5 | 5.3 |
| 2000-04       | 64.1 | 51.3 | 26.4 | 11.5 | 5.9 | 69.5  | 55.9 | 28.6 | 13.4 | 6.2 |
| Finland       |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 73.6 | 59.1 | 31.1 | 15.0 | 6.6 | 80.8  | 66.2 | 37.1 | 19.1 | 8.1 |
| 2003          | 75.1 | 60.6 | 32.3 | 16.1 | 7.0 | 81.8  | 67.2 | 37.9 | 19.9 | 8.5 |
| 2004          | 75.3 | 60.8 | 32.6 | 16.5 | 7.3 | 82.3  | 67.6 | 38.4 | 20.5 | 9.0 |
| Åland         |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 75.8 | 61.3 | 32.7 | 16.2 | 7.1 | 82.5  | 67.6 | 38.4 | 20.5 | 9.0 |
| 2000-04       | 77.7 | 63.4 | 34.7 | 17.5 | 7.5 | 83.9  | 69.4 | 39.9 | 21.3 | 9.4 |
| Iceland       |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 77.1 | 62.6 | 34.0 | 16.7 | 7.3 | 81.4  | 66.8 | 37.4 | 19.6 | 8.6 |
| 2002/03       | 79.0 | 64.4 | 35.3 | 17.8 | 7.7 | 82.4  | 67.7 | 38.5 | 20.4 | 8.8 |
| 2003-04       | 79.2 | 64.5 | 35.5 | 17.9 | 7.7 | 82.7  | 68.0 | 38.8 | 20.5 | 9.3 |
| Norway        |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 75.5 | 61.1 | 32.7 | 15.7 | 6.7 | 81.1  | 66.6 | 37.4 | 19.5 | 8.5 |
| 2003          | 77.0 | 62.5 | 34.0 | 16.7 | 7.0 | 81.9  | 67.4 | 38.1 | 20.1 | 8.9 |
| 2004          | 77.5 | 62.9 | 34.4 | 17.1 | 7.3 | 82.3  | 67.7 | 38.5 | 20.5 | 9.2 |
| Sweden        |      |      |      |      |     |       |      |      |      |     |
| 1996-00       | 76.9 | 62.4 | 33.6 | 16.4 | 7.0 | 81.8  | 67.2 | 37.9 | 19.9 | 8.8 |
| 2003          | 77.9 | 63.3 | 34.4 | 17.0 | 7.3 | 82.4  | 67.8 | 38.4 | 20.3 | 9.1 |
| 2004          | 78.4 | 63.7 | 34.8 | 17.4 | 7.5 | 82.7  | 68.0 | 38.7 | 20.6 | 9.3 |

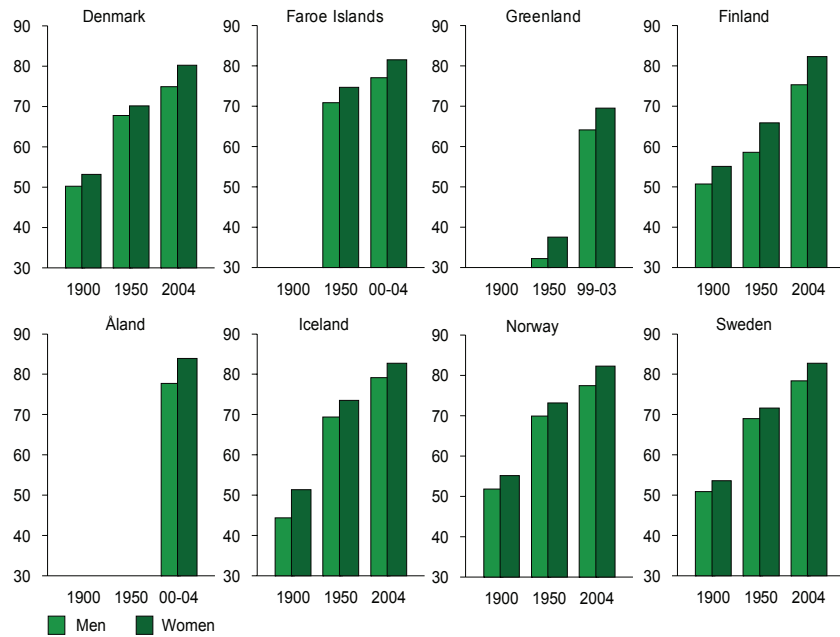
Sources: The central statistical bureaus  
Kilder: De statistiske centralbureauer

**Figure 2.1.2 Live births and natural increase per 1 000 inhabitants 1995-2004**  
Levendefødte og Fødselsoverskud per 1 000 indbyggere 1995-2004



**Figure 2.1.3 Life expectancy at birth 1900, 1950 and 2004**

Middellevetiden for nyfødte 1900, 1950 og 2004



## 2.2 Fertility, births, infant mortality and contraception

In recent years, the overall development in fertility has resulted in Åland and Sweden having the lowest fertility rates in the Nordic countries, while the rates remain high in the Faroe Islands, Greenland and Iceland, particularly for the youngest age groups.

In all the Nordic countries, it is possible to obtain treatment for infertility, paid for by the public health services (in Iceland and Norway there is, however, a certain user charge). As shown in Table 2.2.2, more and more people are receiving such treatment, and a significant proportion of live births are the result of in vitro fertilization (IVF). A large number of births resulting from IVF are still multiple births.

Internationally, the Nordic countries are characterized by having very low perinatal mortality. Greenland has the highest among the Nordic countries. The other countries lie relatively close to each other.

Greenland also has the highest mortality rate for the first year of life. The Faroe Islands had the lowest mortality rate for the first year of life in 2004.

The sale of oral contraceptives varies substantially between the Nordic countries, but these differences have become smaller over time.

The use of sterilization as a means of birth control also varies considerably between the Nordic countries. In most of the countries no permission for sterilization is required if the person is aged 25 or more.

## 2.2 Fertilitet, fødsler, spædbørnsdødelighed og prævention

Udviklingen i den samlede fertilitet har i de seneste år ført til, at fertilitetsraterne i Åland og Sverige nu er de laveste i Norden, mens det fortsat er høje rater på Færøerne, Grønland og i Island, navnlig i de yngste aldersklasser.

I alle de nordiske lande er det muligt at blive behandlet for barnløshed, betalt af det offentlige (i Island og Norge er der dog en vis egenbetaling). Som det ses af tabel 2.2.2 modtager flere og flere behandling og en ikke ubetydelig del af de levendefødte er et resultat af en IVF behandling. For fødsler efter IVF behandling er der fortsat et stort antal flerbarnsfødsler.

Internationalt er de nordiske lande kendetegnet ved at have en meget lav perinatal mortalitet. Grønland ligger højest blandt de nordiske lande. De øvrige lande ligger relativt tæt.

Grønland har ligeledes den højeste dødelighed for det første leveår. Færøerne har den laveste dødelighed i det første leveår i 2004.

Omsætningen af orale præventionsmidler varierer væsentligt mellem de nordiske lande, men der er med tiden sket en vis udligning af forskellene.

Anvendelse af sterilisation som præventionsmiddel varierer ligeledes betydeligt mellem de nordiske lande. I de fleste af landene behøver man ingen tilladelse til at lade sig sterilisere efter det fyldte 25. år.

There are no comparable Nordic statistics about the use of coils and condoms.

Der findes ingen sammenlignelig nordisk statistik om brugen af spiraler og kondomer som præventionsmiddel.

Information about emergency contraception is included in this edition. Use of emergency contraception is relatively widespread in the Nordic countries. Use is highest in Norway and lowest in Denmark, the Faroe Islands, and Greenland. The low use in Denmark reflects the fact that Denmark has the highest number of women who use oral contraceptives.

Der er i denne udgave medtaget informationer om nødprævention som er relativt udbredt i de nordiske lande hvor forbruget er højest i Norge og lavest i Danmark, Færøerne og Grønland. Det lave forbrug i Danmark afspejler at der er flest kvinder der anvender P-piller.

Since the middle of the 1970s, induced abortion has been available in most of the Nordic countries. In Sweden, it is a requirement that the abortion takes place before the end of the 18th week of gestation, while in the other Nordic countries it must be performed before the end of the 12th week of gestation. However, induced abortion can also be carried out after the 12th and 18th week of gestation, but only following special evaluation and permission.

I de fleste af de nordiske lande har der siden midten af 1970'erne været adgang til svangerskabsafbrydelse. I Sverige er det en betingelse, at det sker før udgangen af den 18. graviditetsuge, mens svangerskabsafbrydelsen i de øvrige nordiske lande skal ske inden udgangen af den 12. svangerskabsuge. Fremkaldte aborter kan dog også foretages efter henholdsvis 12. og 18. svangerskabsuge; men da først efter særlig vurdering og tilladelse.

In Denmark, Greenland, Norway and Sweden, it is solely up to the pregnant woman herself to decide whether an abortion is to be performed, while in the Faroe Islands, Finland, Åland and Iceland permission is required. Such permission is given on the basis of social and/or medical criteria.

I Danmark, Grønland, Norge og Sverige er det alene op til den gravide kvinde at afgøre, om der skal foretages et abortindgreb, mens der på Færøerne, i Finland, Åland og Island kræves en tilladelse. En sådan gives ud fra sociale og/eller medicinske kriterier.

Abortion rates vary somewhat in the Nordic countries.

Der er en vis spredning mellem landene med hensyn til abortraterne.

## POPULATION AND FERTILITY

**Table 2.2.1 Live births and fertility rate 1996-2004**

Levendefødte og fertilitetsrate 1996-2004

|                          | <i>Number of<br/>live births</i><br>Antal levende<br>fødte | <i>Live births per 1 000 women by age</i><br>Levendefødte pr. 1 000 kvinder i alderen |       |       |       |       |       |       | <i>Total<br/>fertility rate</i><br>Samlet<br>fertilitet |
|--------------------------|------------------------------------------------------------|---------------------------------------------------------------------------------------|-------|-------|-------|-------|-------|-------|---------------------------------------------------------|
|                          |                                                            | 15-19                                                                                 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 |                                                         |
| <i>Denmark</i>           |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 66 951                                                     | 8.0                                                                                   | 54.7  | 129.7 | 109.3 | 41.3  | 6.0   | 0.2   | 1 746                                                   |
| 2003                     | 64 682                                                     | 6.0                                                                                   | 46.7  | 125.7 | 121.4 | 46.5  | 7.7   | 0.3   | 1 760                                                   |
| 2004                     | 64 609                                                     | 5.7                                                                                   | 45.2  | 126.2 | 125.8 | 47.4  | 7.6   | 0.3   | 1 778                                                   |
| <i>Faroe<br/>Islands</i> |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 657                                                        | 19.3                                                                                  | 108.0 | 166.0 | 129.1 | 58.1  | 11.1  | 0.3   | 2 459                                                   |
| 1999-03                  | 674                                                        | 16.2                                                                                  | 108.2 | 163.0 | 131.8 | 60.3  | 11.3  | 0.1   | 2 455                                                   |
| 2000-04                  | 690                                                        | 15.9                                                                                  | 107.1 | 168.4 | 134.1 | 64.0  | 11.7  | 0.1   | 2 506                                                   |
| <i>Greenland</i>         |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 994                                                        | 55.9                                                                                  | 160.9 | 118.4 | 87.7  | 47.6  | 13.5  | 1.4   | 2 426                                                   |
| 2003                     | 895                                                        | 49.2                                                                                  | 143.2 | 131.3 | 93.2  | 45.7  | 8.4   | 1.1   | 2 361                                                   |
| <i>Finland</i>           |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 58 295                                                     | 9.5                                                                                   | 61.4  | 119.8 | 101.6 | 44.7  | 8.8   | 0.5   | 1 735                                                   |
| 2003                     | 56 630                                                     | 10.3                                                                                  | 57.0  | 115.5 | 106.9 | 49.4  | 10.8  | 0.5   | 1 760                                                   |
| 2004                     | 57 758                                                     | 10.6                                                                                  | 58.0  | 116.1 | 111.5 | 51.1  | 11.0  | 0.5   | 1 800                                                   |
| <i>Åland</i>             |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 286                                                        | 4.9                                                                                   | 42.7  | 122.0 | 106.3 | 50.1  | 8.5   | 0.6   | 1 665                                                   |
| 1999-03                  | 272                                                        | 5.3                                                                                   | 44.5  | 109.6 | 109.9 | 51.8  | 8.9   | 0.4   | 1 658                                                   |
| 2000-04                  | 271                                                        | 5.0                                                                                   | 46.5  | 102.1 | 114.0 | 53.7  | 10.6  | 0.2   | 1 665                                                   |
| <i>Iceland</i>           |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 4 215                                                      | 23.4                                                                                  | 90.2  | 129.0 | 107.2 | 51.6  | 9.4   | 0.2   | 2 055                                                   |
| 2003                     | 4 143                                                      | 16.1                                                                                  | 75.8  | 130.1 | 115.1 | 48.9  | 11.7  | 0.4   | 1 990                                                   |
| 2004                     | 4 234                                                      | 13.0                                                                                  | 75.7  | 132.6 | 117.9 | 55.9  | 11.2  | 0.4   | 2 033                                                   |
| <i>Norway</i>            |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 59 522                                                     | 12.4                                                                                  | 70.6  | 130.9 | 107.8 | 43.5  | 6.9   | 0.2   | 1 851                                                   |
| 2003                     | 56 458                                                     | 9.1                                                                                   | 58.9  | 123.6 | 113.2 | 47.5  | 7.7   | 0.3   | 1 797                                                   |
| 2004                     | 56 951                                                     | 8.2                                                                                   | 59.6  | 123.9 | 117.1 | 49.1  | 7.9   | 0.3   | 1 828                                                   |
| <i>Sweden</i>            |                                                            |                                                                                       |       |       |       |       |       |       |                                                         |
| 1996-00                  | 90 688                                                     | 7.1                                                                                   | 51.7  | 107.9 | 93.4  | 40.3  | 7.3   | 0.3   | 1 540                                                   |
| 2003                     | 99 157                                                     | 6.0                                                                                   | 47.1  | 111.3 | 118.1 | 51.1  | 9.6   | 0.4   | 1 717                                                   |
| 2004                     | 100 928                                                    | 5.8                                                                                   | 46.9  | 111.9 | 122.4 | 52.9  | 10.7  | 0.4   | 1 752                                                   |

Sources: The central statistical bureaus

Kilder: De statistiske centralbureauer

**Table 2.2.2 In vitro fertilization 1995–2004<sup>1)</sup>**  
 IVF-behandling 1995–2004<sup>1)</sup>

|                                                                 | Denmark | Finland | Iceland <sup>2)</sup> | Norway <sup>3)</sup> | Sweden      |
|-----------------------------------------------------------------|---------|---------|-----------------------|----------------------|-------------|
| <i>Treatments, IVF+ICSI</i>                                     |         |         |                       |                      |             |
| <i>Behandlinger, IVF+ICSI</i>                                   |         |         |                       |                      |             |
| 1995–1999                                                       | ..      | 4 569   | 324                   | ..                   | ..          |
| 2000                                                            | 7 002   | 4 323   | 298                   | 4 029                | 6 586       |
| 2001                                                            | ..      | 4 244   | 309                   | 4 045                | 7 115       |
| 2002                                                            | ..      | 4 369   | 311                   | 3 629                | 7 479       |
| 2003                                                            | ..      | 4 438   | 314                   | 4.793                | ..          |
| 2004                                                            | 7 679   | 4 176   | 273                   | ..                   | ..          |
| <i>Frozen embryo transfers, FET</i>                             |         |         |                       |                      |             |
| <i>Tilbageføring af nedfrosne æg, FET</i>                       |         |         |                       |                      |             |
| 1995–1999                                                       | ..      | 2 015   | ..                    | ..                   | ..          |
| 2000                                                            | 975     | 2 488   | 83                    | 301                  | 1 208       |
| 2001                                                            | ..      | 2 814   | 68                    | 359                  | 1 685       |
| 2002                                                            | ..      | 2 745   | 72                    | 265                  | 1 743       |
| 2003                                                            | ..      | 2 552   | 86                    | 559                  | ..          |
| 2004                                                            | 1 398   | 3 561   | 71                    | ..                   | ..          |
| <i>Number of live births, IVF+ ICSI + FET</i>                   |         |         |                       |                      |             |
| <i>Antal levendefødte, IVF+ ICSI + FET</i>                      |         |         |                       |                      |             |
| 1995–1999                                                       | ..      | 1 348   | ..                    | ..                   | ..          |
| 2000                                                            | 2 085   | 1 388   | 147                   | 1 097                | 2 237       |
| 2001                                                            | ..      | 1 360   | 116                   | 1 243                | 2 519       |
| 2002                                                            | ..      | 1 438   | 130                   | 1 092                | 2 706       |
| 2003                                                            | ..      | 1 555   | 140                   | 1 371                | ..          |
| 2004                                                            | 2 338   | 1 582   | 81                    | ..                   | ..          |
| <i>Treatments in 2004 per 1 000 women aged 15–49 years</i>      |         |         |                       |                      |             |
| <i>Behandlinger i 2004 pr. 1 000 kvinder i alderen 15–49 år</i> |         |         |                       |                      |             |
| IVF+ICSI                                                        | 6.2     | 4.1     | 3.7                   | 2003<br>4.5          | 2002<br>3.8 |
| FET                                                             | 1.1     | 3.0     | 1.0                   | 0.5                  | 0.9         |
| Total                                                           | 7.7     | 7.1     | 4.7                   | 5.0                  | 4.6         |
| <i>Multiple births, per cent of all births after IVF</i>        |         |         |                       |                      |             |
| <i>Flerbarnsfødsler, procent af</i>                             |         |         |                       |                      |             |
| <i>alle fødsler efter IVF-behandling</i>                        |         |         |                       |                      |             |
|                                                                 | 21.2    | 12.3    | 23.4                  | 24.1                 | 18.5        |
| <i>Children born in multiple births,</i>                        |         |         |                       |                      |             |
| <i>per cent of all children born after IVF</i>                  |         |         |                       |                      |             |
| <i>Børn født i flerbarnsfødsler, procent af</i>                 |         |         |                       |                      |             |
| <i>alle børn født efter IVF-behandling</i>                      |         |         |                       |                      |             |
|                                                                 | 35.2    | 22.1    | 21.0                  | 38.9                 | 31.4        |
| <i>IVF, ICSI and FET, per cent of all live births</i>           |         |         |                       |                      |             |
| <i>IVF, ICSI and FET i procent af alle levendefødte</i>         |         |         |                       |                      |             |
|                                                                 | 3.6     | 2.7     | 1.9                   | 2.4                  | 2.8         |

IVF = In vitro fertilization (reagensglasbefrugtning)

ICSI = Intracytoplasmic sperm injection (mikrobehandling)

FET = Frozen embryo transfer (tilbageføring af nedfrosne æg)

1 Based on the year of treatment not on the year of birth.

2 During 2004, IVF treatment was transferred to a private company. This means that the treatment was not available during part of the year. Consequently, there were fewer treatments than in previous years.

3 Figures include the number of live births for all births

1 Beregnet ud fra behandlingsår, ikke fødselsår.

Alle fødsler, ikke kun levendefødte.

2 I løbet af 2004 blev IVF behandlingen flyttet til et privat firma, hvilket betød at der ikke var behandling i en del af året og derved var behandlingen mindre end tidligere år.

3 I Norge dækker antal levendefødte over alle fødsler.

Source: D: National Board of Health; F: STAKES; I: Art Medica; N: Ministry of Health;  
 S: National Board of Health and Welfare.

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**Table 2.2.3 Stillbirths and infant mortality<sup>1)</sup> 1996-2004**  
Dødfødte og dødelighed i første leveår<sup>1)</sup> 1996-2004

|               | <i>Number</i><br>Antal         |                                          | <i>Per 1 000 births</i><br>Pr. 1 000 fødte |                                            | <i>Deaths per 1 000 live births</i><br>Døde pr. 1 000 levendefødte |                             |                               |                                               |
|---------------|--------------------------------|------------------------------------------|--------------------------------------------|--------------------------------------------|--------------------------------------------------------------------|-----------------------------|-------------------------------|-----------------------------------------------|
|               | <i>Stillbirths</i><br>Dødfødte | <i>Infant deaths</i><br>Døde i 1. leveår | <i>Stillbirths</i><br>Dødfødte             | <i>Perinatal deaths</i><br>Perinatalt døde | <i>First 24 hours</i><br>Første 24 timer                           | <i>1-6 days</i><br>1-6 dage | <i>7-27 days</i><br>7-27 dage | <i>Total under 1 year</i><br>I alt under 1 år |
| Denmark       |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 308                            | 332                                      | 4.6                                        | 7.6                                        | 1.6                                                                | 1.4                         | 0.6                           | 5.0                                           |
| 2003          | 241                            | 264                                      | 3.7                                        | 6.4                                        | 1.5                                                                | 1.2                         | 0.4                           | 4.1                                           |
| Faroe Islands |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 3.2                            | 1.2                                      | 4.9                                        | 6.1                                        | 0.9                                                                | 0.3                         | 0.3                           | 1.8                                           |
| 2000-04       | 2.0                            | 1.2                                      | 2.9                                        | 3.5                                        | 0.3                                                                | 0.3                         | 0.6                           | 1.7                                           |
| Greenland     |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 8                              | 17                                       | 8.1                                        | 19.6                                       | 8.1                                                                | 3.1                         | 1.0                           | 16.8                                          |
| 2003          | 4                              | 12                                       | 4.5                                        | 12.4                                       | 4.5                                                                | 3.4                         | 1.1                           | 13.5                                          |
| 2004          | 4                              | 18                                       | 4.4                                        | 11.1                                       | 6.7                                                                | ..                          | ..                            | 20.1                                          |
| Finland       |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 214                            | 227                                      | 3.7                                        | 5.8                                        | 1.3                                                                | 0.8                         | 0.6                           | 3.9                                           |
| 2003          | 178                            | 182                                      | 3.1                                        | 4.8                                        | 0.9                                                                | 0.7                         | 0.4                           | 3.2                                           |
| 2004          | 187                            | 191                                      | 3.2                                        | 5.2                                        | 1.1                                                                | 0.8                         | 0.5                           | 3.3                                           |
| Åland         |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | -                              | 1                                        | 1.5                                        | 3.5                                        | 0.7                                                                | 1.4                         | -                             | 3.5                                           |
| 2000-04       | 1                              | 1.2                                      | 3.7                                        | 7.4                                        | 1.5                                                                | 2.2                         | -                             | 4.4                                           |
| Iceland       |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 15                             | 15                                       | 3.5                                        | 5.7                                        | 1.6                                                                | 0.5                         | 0.3                           | 3.5                                           |
| 2003          | 4                              | 10                                       | 1.0                                        | 2.7                                        | 1.0                                                                | 0.7                         | 0.2                           | 2.4                                           |
| 2004          | 15                             | 12                                       | 3.5                                        | 4.5                                        | 0.7                                                                | 0.2                         | 0.5                           | 2.8                                           |
| Norway        |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 244                            | 244                                      | 4.1                                        | 6.2                                        | 1.0                                                                | 1.1                         | 0.6                           | 4.1                                           |
| 2003          | 213                            | 197                                      | 3.8                                        | 5.7                                        | 1.0                                                                | 1.0                         | 0.5                           | 3.5                                           |
| 2004          | 210                            | 187                                      | 3.7                                        | 5.2                                        | 0.8                                                                | 0.8                         | 0.7                           | 3.3                                           |
| Sweden        |                                |                                          |                                            |                                            |                                                                    |                             |                               |                                               |
| 1996-00       | 332                            | 325                                      | 3.7                                        | 5.4                                        | 0.8                                                                | 0.9                         | 0.6                           | 3.6                                           |
| 2003          | 359                            | 308                                      | 3.6                                        | 5.2                                        | 0.7                                                                | 0.9                         | 0.6                           | 3.1                                           |
| 2004          | 333                            | 314                                      | 3.3                                        | 5.0                                        | 0.8                                                                | 1.0                         | 0.5                           | 3.1                                           |

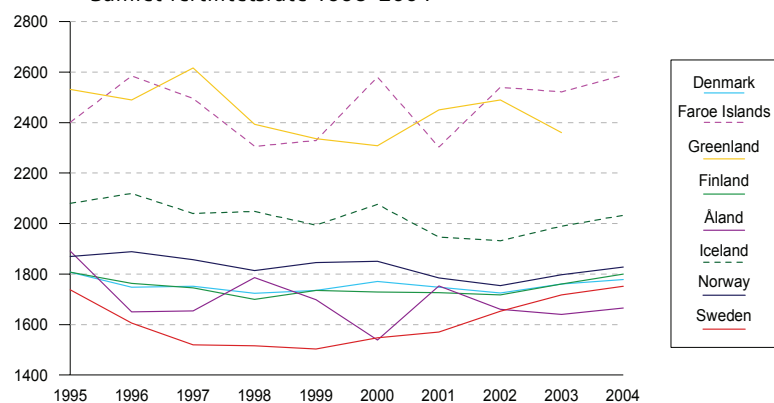
1 Computed by year of death.

1 Opgjort efter dødsår.

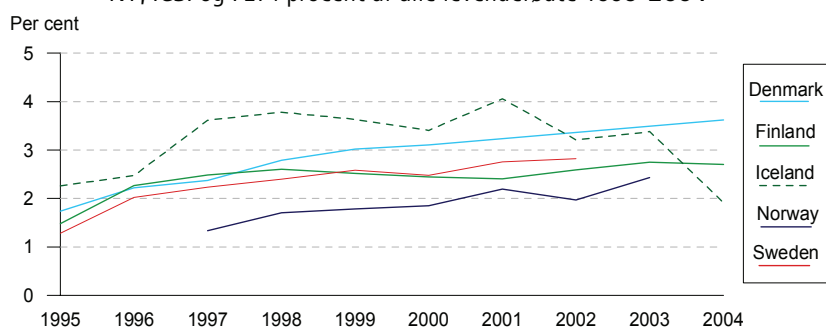
Sources: D: National Board of Health; FI: Chief Medical Officer in the Faroes; G: Chief Medical Officer; F & Å: Statistics Finland; I: Statistics Iceland; N: Statistics Norway ; S: Statistics Sweden

**Figure 2.2.1 Total fertility rate 1995-2004**

Samlet fertilitetsrate 1995-2004

**Figure 2.2.2 IVF, ICSI and FET, percentage of all live births 1995-2004**

IVF, ICSI og FET i procent af alle levendefødte 1995-2004

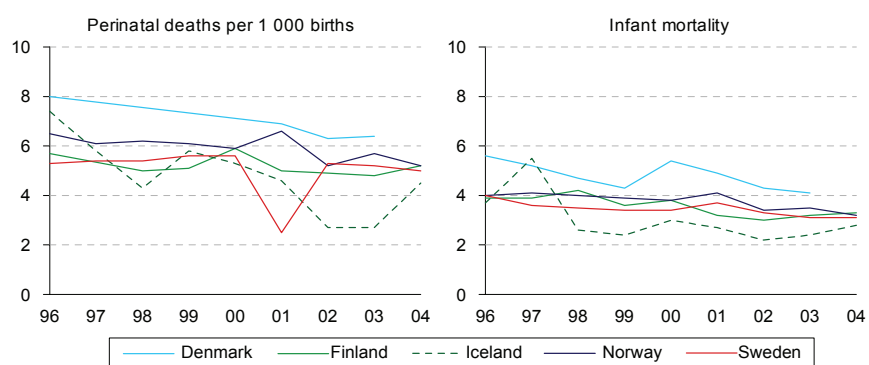


Source: Tables 2.2.2

Kilde: Tabel 2.2.2

**Figure 2.2.3 Perinatal deaths and infant mortality 1996-2004**

Perinatal dødelighed og dødelighed i første leveår 1996-2004



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**Table 2.2.4 Stillbirths and deaths during first year of life per 1 000 births, with birthweight 1 000 grams and more, total figures and rates per 1 000 births<sup>1)</sup> 1995–2004**

Dødfødte og døde i løbet af første leveår med en fødselsvægt på 1 000 gram og mere, i alt og pr. 1 000 fødte 1995–2004<sup>1)</sup>

|         | Number<br>Antal         |                                         | Per 1 000<br>births<br>Pr. 1 000<br>fødte |                                         | Deaths per 1 000 live births<br>Døde pr. 1 000 levendefødte |                        |                                             |                                                |
|---------|-------------------------|-----------------------------------------|-------------------------------------------|-----------------------------------------|-------------------------------------------------------------|------------------------|---------------------------------------------|------------------------------------------------|
|         | Stillbirths<br>Dødfødte | Infant<br>deaths<br>Døde i<br>1. leveår | Stillbirths<br>Dødfødte                   | First 24<br>hours<br>Første 24<br>timer | 1–6 days<br>1–6 dage                                        | 7–27 days<br>7–27 dage | 28 days to<br>1 year<br>28 dage til<br>1 år | Total un-<br>der 1 year<br>I alt under<br>1 år |
| Denmark |                         |                                         |                                           |                                         |                                                             |                        |                                             |                                                |
| 1995    | 282                     | 330                                     | 4.0                                       | 1.0                                     | 1.9                                                         | 0.6                    | 1.3                                         | 4.7                                            |
| 2000    | 183                     | 238                                     | 2.9                                       | 0.6                                     | 1.3                                                         | 0.5                    | 1.2                                         | 3.6                                            |
| 2003    | 203                     | 134                                     | 3.2                                       | 0.5                                     | 0.5                                                         | 0.2                    | 0.8                                         | 2.0                                            |
| Finland |                         |                                         |                                           |                                         |                                                             |                        |                                             |                                                |
| 1995    | 189                     | 168                                     | 3.0                                       | 0.5                                     | 0.7                                                         | 0.5                    | 1.0                                         | 2.7                                            |
| 2000    | 150                     | 152                                     | 2.7                                       | 0.6                                     | 0.5                                                         | 0.5                    | 1.1                                         | 2.7                                            |
| 2003    | 128                     | 137                                     | 2.3                                       | 0.5                                     | 0.7                                                         | 0.3                    | 0.9                                         | 2.4                                            |
| 2004    | 113                     | 119                                     | 2.3                                       | 0.4                                     | 0.6                                                         | 0.3                    | 0.8                                         | 2.1                                            |
| Iceland |                         |                                         |                                           |                                         |                                                             |                        |                                             |                                                |
| 1995    | 7                       | 13                                      | 1.6                                       | 0.9                                     | 0.7                                                         | –                      | 1.4                                         | 3.0                                            |
| 2000    | 13                      | 5                                       | 3.0                                       | 0.0                                     | 0.2                                                         | 0.2                    | 0.7                                         | 1.2                                            |
| 2003    | 3                       | 5                                       | 0.7                                       | 0.5                                     | –                                                           | 0.2                    | 0.5                                         | 1.2                                            |
| 2004    | 13                      | 10                                      | 3.1                                       | 0.7                                     | 0.2                                                         | 0.2                    | 1.2                                         | 2.4                                            |
| Norway  |                         |                                         |                                           |                                         |                                                             |                        |                                             |                                                |
| 1995    | 177                     | 182                                     | 2.9                                       | 0.7                                     | 0.7                                                         | 0.4                    | 1.3                                         | 3.0                                            |
| 2000    | 196                     | 144                                     | 3.3                                       | 0.7                                     | 0.4                                                         | 0.4                    | 1.1                                         | 2.5                                            |
| 2003    | 164                     | 127                                     | 2.9                                       | 0.5                                     | 0.6                                                         | 0.2                    | 0.9                                         | 2.2                                            |
| 2004    | 159                     | 125                                     | 2.8                                       | 0.4                                     | 0.5                                                         | 0.4                    | 0.9                                         | 2.2                                            |
| Sweden  |                         |                                         |                                           |                                         |                                                             |                        |                                             |                                                |
| 1995    | 318                     | 376                                     | 3.1                                       | 1.4                                     | 0.6                                                         | 0.5                    | 1.2                                         | 3.7                                            |
| 2000    | 318                     | 251                                     | 3.6                                       | 0.8                                     | 0.7                                                         | 0.4                    | 0.9                                         | 2.8                                            |
| 2003    | 288                     | 211                                     | 3.0                                       | 0.3                                     | 0.6                                                         | 0.5                    | 0.8                                         | 2.2                                            |

1 Computed by year of birth.

1 Opgjort efter fødselsår.

Sources: D: National Board of Health F: Statistics Finland & STAKES; I: Medical Birth Registry of Iceland & Statistics Iceland; N: Medical Birth Registry of Norway; S: Medical Birth Registry, National Board of Health and Welfare

**Table 2.2.5 Sterilizations 1995-2004**

Sterilisationer 1995-2004

|                                   | <i>Denmark<sup>1)</sup></i> | <i>Faroe Islands</i> | <i>Greenland</i> | <i>Finland</i> | <i>Of which Åland</i> | <i>Iceland<sup>2)</sup></i> | <i>Norway</i> | <i>Sweden<sup>3)</sup></i> |
|-----------------------------------|-----------------------------|----------------------|------------------|----------------|-----------------------|-----------------------------|---------------|----------------------------|
| <i>Men</i>                        |                             |                      |                  |                |                       |                             |               |                            |
| Mænd                              |                             |                      |                  |                |                       |                             |               |                            |
| 1995                              | 5 256                       | 3                    | 4                | 792            | -                     | 87                          | 2 697         | 1 507                      |
| 2000                              | 5 544                       | 10                   | 18               | 1 771          | 2                     | 246                         | 3 244         | 1 459                      |
| 2003                              | 5 113                       | 12                   | 2                | 1 639          | -                     | 262                         | 3 155         | 1 619                      |
| 2004                              | 5 119                       | 18                   | 8                | 1 595          | 1                     | 216                         | ..            | ..                         |
| <i>Women</i>                      |                             |                      |                  |                |                       |                             |               |                            |
| Kvinder                           |                             |                      |                  |                |                       |                             |               |                            |
| 1995                              | 4 815                       | 60                   | 67               | 10 521         | 31                    | 553                         | 4 525         | 5 919                      |
| 2000                              | 5 101                       | 29                   | 127              | 8 699          | 31                    | 519                         | 4 512         | 4 533                      |
| 2003                              | 5 116                       | 25                   | 97               | 5 904          | 22                    | 365                         | 1 624         | 3 954                      |
| 2004                              | 5 010                       | 38                   | 80               | 5 652          | 40                    | 295                         | ..            | ..                         |
| <i>Total</i>                      |                             |                      |                  |                |                       |                             |               |                            |
| I alt                             |                             |                      |                  |                |                       |                             |               |                            |
| 1995                              | 10 071                      | 63                   | 71               | 11 313         | 31                    | 640                         | 7 222         | 7 426                      |
| 2000                              | 10 645                      | 39                   | 145              | 10 470         | 33                    | 765                         | 7 756         | 5 992                      |
| 2003                              | 10 229                      | 37                   | 99               | 7 543          | 22                    | 627                         | 4 779         | 5 573                      |
| 2004                              | 10 129                      | 56                   | 88               | 7 247          | 41                    | 511                         | ..            | ..                         |
| [2004]                            |                             |                      |                  |                |                       |                             |               |                            |
| <i>Per 1 000 in the age group</i> |                             |                      |                  |                |                       |                             |               |                            |
| <i>Pr. 1 000 i aldermen</i>       |                             |                      |                  |                |                       |                             |               |                            |
| <i>Men</i>                        |                             |                      |                  |                |                       |                             |               |                            |
| Mænd                              |                             |                      |                  |                |                       |                             |               |                            |
| 25-34                             | 2.4                         | 0.9                  | 0.3              | 0.8            | -                     | 1.6                         | ..            | 0.4                        |
| 35-44                             | 7.9                         | 1.6                  | 0.8              | 2.5            | 0.5                   | 6.4                         | ..            | 1.4                        |
| 45-54                             | 2.4                         | 0.5                  | 0.5              | 0.8            | -                     | 1.9                         | ..            | 0.7                        |
| <i>Women</i>                      |                             |                      |                  |                |                       |                             |               |                            |
| Kvinder                           |                             |                      |                  |                |                       |                             |               |                            |
| 25-34                             | 4.4                         | 3.4                  | 9.5              | 3.8            | 3.9                   | 4.0                         | ..            | 1.4                        |
| 35-44                             | 8.0                         | 8.3                  | 9.2              | 11.5           | 16.5                  | 9.2                         | ..            | 4.7                        |
| 45-54                             | 0.5                         | 1.0                  | ..               | 0.7            | 1.0                   | 0.8                         | ..            | 0.4                        |

1 Sterilizations performed in hospitals.

2 Figures 2004 are preliminary.

3 2003.

1 Sterilisationer udført på sygehuse.

2 Tal for 2004 er foreløbige.

3 2003.

Sources: D: National Board of Health; FI: Chief Medical Officer; G: Chief Medical Officer; F &amp; Å: STAKES;

Kilder: I: Directorate of Health; N: Statistics Norway; S: National Board of Health and Welfare

## POPULATION AND FERTILITY

**Table 2.2.6 Sales of oral contraceptives per 1 000 women aged 15–44 years  
1995–2004. DDD per 1 000 women 15–44 years per day**  
Salg af p-piller pr. 1 000 kvinder i alderen 15–44 år 1995–2004.  
DDD pr. 1 000 kvinder i alderen 15–44 år pr. dag

| ATC code<br>G03A | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| 1995             | 280     | 214              | 143       | 201     | 257   | 226     | 198    | 258    |
| 2000             | 315     | 258              | 186       | 224     | 281   | 265     | 225    | 296    |
| 2003             | 333     | 286              | 186       | 216     | 240   | 266     | 237    | 264    |
| 2004             | 319     | 261              | 215       | 210     | 229   | 257     | 253    | 293    |

Sources: D: Danish Medicines Agency; FI: Chief Pharmaceutical Officer; G: Medical Officer; F & Å: National  
Kilder: Agency for Medicines; I: Ministry of Health and Social Security; N: WHO Collaborating Centre for Drug  
Statistics Methodology; S: National Corporation of Swedish Pharmacies

**Table 2.2.7 Number of sold packages of emergency prevention 2000–2004**  
Antal solgte forpakninger af nødprævention 2000–2004

| ATC code G03A                 | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway  | Sweden  |
|-------------------------------|---------|------------------|-----------|---------|-------|---------|---------|---------|
| 2000                          | 30 549  | 104              | –         | 42 706  | 176   | 1 978   | 27 700  | 10 880  |
| 2001                          | 38 386  | 189              | 5         | 45 242  | 223   | 3 310   | 66 600  | 84 073  |
| 2003                          | 59 864  | 418              | 310       | 87 955  | 349   | 3 956   | 99 500  | 146 183 |
| 2004                          | 70 900  | 270              | 374       | 91 598  | 460   | 4 964   | 114 245 | 164 994 |
| Per 1 000 women<br>aged 15–44 |         |                  |           |         |       |         |         |         |
| 2000                          | 28.5    | 12.2             | –         | 41.9    | 36.0  | 31.6    | 30.2    | 6.4     |
| 2001                          | 35.9    | 21.8             | 0.4       | 44.7    | 45.8  | 52.5    | 72.7    | 49.6    |
| 2003                          | 56.5    | 46.8             | 24.7      | 88.1    | 71.5  | 63.1    | 108.3   | 85.6    |
| 2004                          | 67.1    | 30.1             | 29.7      | 92.1    | 94.4  | 79.0    | 123.9   | 96.0    |

Sources: D: Danish Medicines Agency; FI: Chief Pharmaceutical Officer; G: Medical Officer; F & Å: National  
Kilder: Agency for Medicines; I: Ministry of Health and Social Security; N: WHO Collaborating Centre for Drug  
Statistics Methodology; S: National Corporation of Swedish Pharmacies

**Table 2.2.8 Number of induced abortions 1996–2004**

Antal fremkaldte aborter 1996–2004

|               | Number of abortions | Abortions per 1 000 women by age<br>Aborter pr. 1 000 kvinder i alderen |       |       |       |       |       |       | Total abortion rate | Abortions per 1 000 live births |
|---------------|---------------------|-------------------------------------------------------------------------|-------|-------|-------|-------|-------|-------|---------------------|---------------------------------|
|               | Antal aborter       | 15-19                                                                   | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | Samlet abortrate    | Aborter pr. 1 000 levendefødte  |
| Denmark       |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 16 580              | 14.5                                                                    | 21.0  | 19.5  | 18.3  | 12.8  | 4.8   | 0.5   | 456.5               | 247.4                           |
| 2003          | 15 622              | 14.8                                                                    | 21.0  | 18.1  | 17.2  | 13.4  | 5.2   | 0.4   | 450.8               | 241.2                           |
| 2004          | 15 231              | 15.8                                                                    | 21.4  | 17.1  | 16.5  | 12.8  | 5.1   | 0.4   | 445.6               | 235.2                           |
| Faroe Islands |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 47                  | 4.4                                                                     | 5.2   | 7.3   | 7.8   | 5.5   | 2.9   | 0.6   | 168.3               | 70.9                            |
| 2003          | 37                  | 4.2                                                                     | 6.7   | 6.5   | 3.4   | 3.0   | 1.9   | -     | 129.0               | 52.6                            |
| 2004          | 44                  | 4.6                                                                     | 6.9   | 7.4   | 2.8   | 6.5   | 1.3   | 0.7   | 150.7               | 61.7                            |
| Greenland     |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 881                 | 114.6                                                                   | 138.7 | 87.7  | 57.8  | 28.0  | 9.2   | 1.1   | 2 185.5             | 888.6                           |
| 2003          | 869                 | 113.1                                                                   | 148.5 | 93.3  | 52.4  | 31.3  | 12.7  | 1.2   | 2 278.9             | 970.9                           |
| 2004          | 905                 | 115.6                                                                   | 150.7 | 100.6 | 69.9  | 24.9  | 9.4   | 1.6   | 2 363.5             | 1 008.9                         |
| Finland       |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 10 638              | 12.8                                                                    | 15.0  | 13.3  | 10.9  | 7.4   | 2.9   | 0.3   | 312.9               | 183.2                           |
| 2003          | 10 768              | 15.2                                                                    | 16.9  | 12.2  | 10.6  | 8.0   | 2.9   | 0.3   | 328.4               | 189.7                           |
| 2004          | 11 091              | 15.7                                                                    | 18.4  | 12.6  | 10.6  | 7.9   | 3.1   | 0.2   | 341.0               | 192.7                           |
| Åland         |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 64                  | 16.6                                                                    | 20.8  | 12.9  | 14.0  | 10.0  | 4.8   | 0.8   | 398.9               | 224.6                           |
| 2003          | 70                  | 13.6                                                                    | 29.8  | 9.7   | 16.8  | 14.7  | 4.4   | 1.0   | 448.9               | 273.4                           |
| 2004          | 59                  | 18.5                                                                    | 17.6  | 17.8  | 7.4   | 10.8  | 3.3   | -     | 376.5               | 217.7                           |
| Iceland       |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 922                 | 22.6                                                                    | 24.0  | 17.4  | 11.8  | 9.4   | 3.9   | 0.3   | 447.2               | 218.8                           |
| 2003          | 951                 | 19.1                                                                    | 23.5  | 16.5  | 16.9  | 10.2  | 4.6   | 0.3   | 455.3               | 229.5                           |
| 2004          | 889                 | 20.3                                                                    | 22.4  | 15.0  | 12.4  | 9.5   | 5.0   | 0.4   | 424.7               | 210.0                           |
| Norway        |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 14 248              | 18.7                                                                    | 26.1  | 19.7  | 15.2  | 9.9   | 3.5   | 0.3   | 471.0               | 239.4                           |
| 2003          | 13 888              | 16.3                                                                    | 26.9  | 19.5  | 15.2  | 10.8  | 4.0   | 0.3   | 466.0               | 246.0                           |
| 2004          | 14 071              | 15.3                                                                    | 27.3  | 19.4  | 15.9  | 11.4  | 4.1   | 0.3   | 470.5               | 247.1                           |
| Sweden        |                     |                                                                         |       |       |       |       |       |       |                     |                                 |
| 1996-00       | 31 250              | 18.2                                                                    | 27.0  | 23.4  | 20.2  | 15.0  | 5.9   | 0.6   | 551.5               | 344.4                           |
| 2003          | 34 473              | 24.0                                                                    | 31.2  | 23.7  | 20.5  | 15.7  | 6.7   | 0.7   | 612.3               | 347.7                           |
| 2004          | 34 454              | 23.3                                                                    | 30.6  | 24.1  | 20.1  | 15.9  | 7.0   | 0.6   | 607.9               | 341.4                           |

Definition: The total abortion rate is the number of abortions given by 1 000 women provided they live to be 50 years, calculated from the age specific abortion rates of the current period.

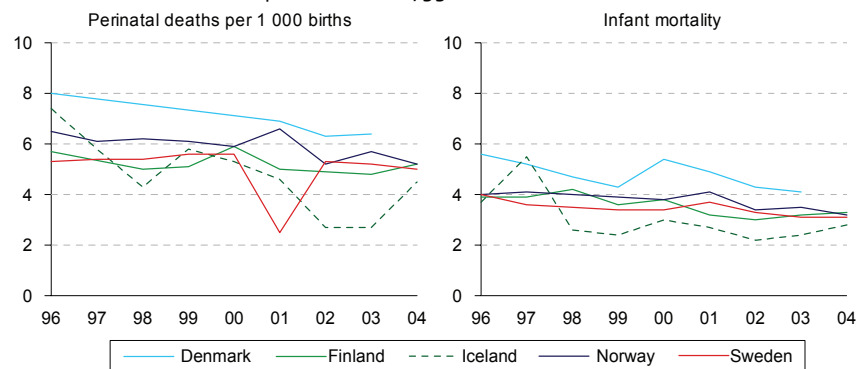
Definition: Den samlede abort rate er antallet af aborter pr. 1 000 kvinder, der forventes at leve til de bliver 50 år, udregnet fra den aldersspecifikke abort i den bestemte periode.

Sources: The national abortion registers

Kilder: De nationale abortregistre

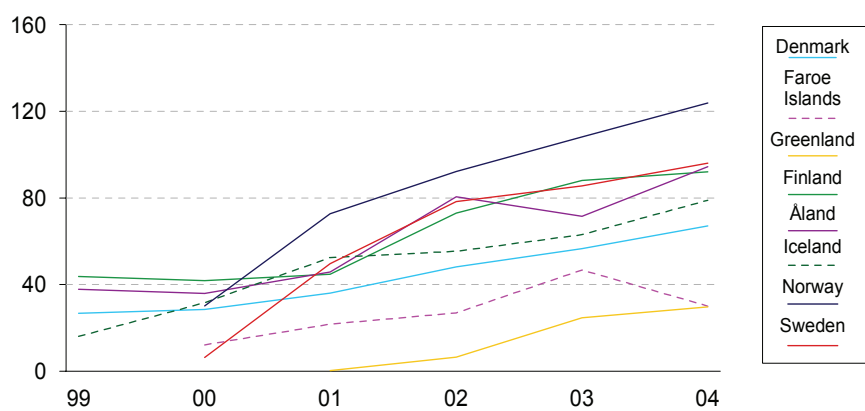
## POPULATION AND FERTILITY

**Figure 2.2.4 Sterilizations per 1 000 inhabitants aged 25-54 1995-2004**  
Sterilisationer pr. 1 000 indbyggere i alderen 25-54 år 1995-2004



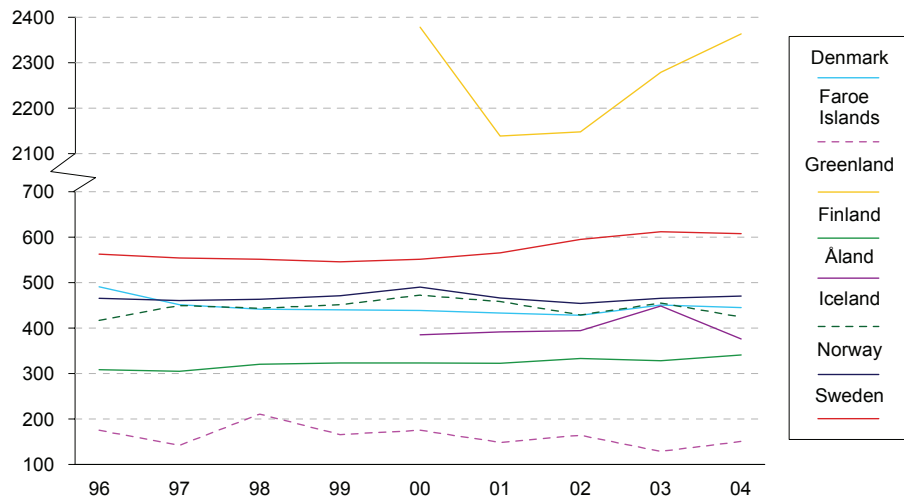
Source: Tables 2.2.2  
Kilde: Tabel 2.2.2

**Figure 2.2.5 Sales of emergency prevention per 1 000 women aged 15-45 years 1995-2004**  
Salg af nødprævention pr. 1 000 kvinder i alderen 15-45 år 1995-2004



Source: Tables 2.2.7  
Kilde: Tabel 2.2.7

**Figure 2.2.6 Total abortion rate 1996-2004**  
 Samlet abortrate 1996-2004



Source: Table 2.2.8  
 Kilde: Tabel 2.2.8

## Chapter III

### Morbidity, medical treatment, accidents and medicinal products

*Sygelighed, sygdomsbehandling, ulykker og medicin*

|                                                                                  |                                                                                   |     |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----|
| <b>Morbidity, medical treatment, accidents and medical products</b>              | <b>Sygelighed, sygdomsbehandling, ulykker og medicin</b>                          |     |
| • <a href="#">Introduction</a>                                                   | • <a href="#">Indledning</a>                                                      | 95  |
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| <a href="#">Reference group for Patient Statistics</a>                           | <a href="#">Referencegruppe for patient statistik</a>                             |     |
| <a href="#">Discharge data</a>                                                   | <a href="#">Data for udskrivningerne</a>                                          |     |
| <a href="#">Shortlist for discharges</a>                                         | <a href="#">Kortliste for udskrivninger</a>                                       |     |
| <a href="#">Surgery data</a>                                                     | <a href="#">Data for kirugi</a>                                                   |     |
| <a href="#">Shortlist for surgery</a>                                            | <a href="#">Kortliste for kirugi</a>                                              |     |
| <a href="#">The Nordic Cancer Union</a>                                          | <a href="#">Den nordiske cancerunion</a>                                          |     |

## Introduction

This chapter begins with a description of a number of diseases that can be related to the lifestyle and social behaviour of people in the population, followed by data on the incidence of cancer. This is followed by a presentation of data on treatment provided outside hospitals and in hospitals, according to diagnostic group and for common surgical procedures. Following this, data on admissions to hospitals due to accidents are presented. Finally data on consumption of medicinal products are presented.

### 3.1 Diseases related to lifestyle

This section deals with a number of diseases that can be related to the lifestyle and social behaviour of people in the population, and that can be treated either outside hospitals or in hospitals.

Although the number of smokers in the Nordic countries has been decreasing during recent years, there continues to be large differences in the number of smokers, both for men and for women and some differences between countries. Among other things, this pattern of behaviour is reflected in the incidence of lung cancer, as shown in Figure 3.1.1

With regard to alcohol consumption, the statistics are inadequate, as the available data are based on sales figures. These figures indicate that the largest consumption/sales are to be found in Denmark and Greenland, followed by Finland, whereas consumption/sales in the other countries is

## Indledning

I dette kapitel omtales først et antal sygdomme der kan relateres til befolkningens livsstil/sociale adfærd, efterfulgt af forekomsten af nye tilfælde af cancer. Herefter belyses den behandling der gives udenfor sygehusene, efterfulgt af en belysning af behandling ved sygehusene fordelt på diagnosegrupper og ved vigtige kirurgiske indgreb. Herefter omtales ulykkesforekomst og personer indlagt på sygehuse på grund af ulykker. Og til sidst omtales medicinforbruget.

### 3.1 Sygdomme relateret til livsstil

I dette afsnit belyses et antal sygdomme som kan henføres til befolkningernes livsstil/sociale adfærd og som enten behandles uden for sygehusene og/eller indenfor sygehusene.

Selvom antallet af rygere i de senere år er faldende i de nordiske lande, er der dog fortsat store forskelle i antallet af rygere, både hos mænd og kvinder og en vis forskel mellem landene. Dette adfærdsmønster afspejler sig blandt andet i forekomsten af nye tilfælde af lungecancer som det fremgår af figur 3.1.1

Når det gælder forbruget af alkohol er statistikken mangelfuld, idet de tilgængelige data er hentet fra varestatistikken. Heraf fremgår det at det største forbrug/salg findes i Danmark og Grønland efterfulgt af Finland mens forbruget så nogenlunde er på samme niveau i de øv-

at about the same level. Accordingly, the number of treatment periods/discharges from hospital for alcoholic liver diseases is highest in Denmark and Finland.

This publication has previously included data on the occurrence of hepatitis B and C, but as the information from the different countries is not comparable this table has been left out.

The incidence of HIV infection is relatively stable, with the highest incidence in Denmark and the lowest in Finland. There has been a greater increase in the incidence in women, in Denmark, Finland, Norway and Sweden. The trend is related to new methods of treatment. Because of these new methods, infected people are healthier.

Without doubt, chlamydia infection is the most common sexually transmitted disease in the Nordic countries. It is also the most common cause of infertility among women. The disease is often without symptoms.

A marked fall in the incidence of the traditional sexually transmitted diseases, gonorrhoea and syphilis, has been seen in all countries over the last 20 years. However, there are certain notable exceptions, with Greenland being radically different from the other countries.

rige lande. Tilsvarende findes der også fleste behandlingsperioder/udskrivninger for alkoholiske leversygdomme i Danmark og Finland.

Der er tidligere i denne publikation medtaget data for forekomst af hepatitis B og C, men da landenes oplysninger ikke er sammenlignelige udgår denne tabel.

Forekomsten af HIV smitte ligger relativt stabil med de højeste forekomster i Danmark og de laveste i Finland. Både i Danmark, Finland, Norge og Sverige har der vist sig en større stigning blandt kvinder. Udviklingen skal ses i sammenhæng med de nye behandlingsmetoder der giver flere symptomfrie smittebærere.

Chlamydiainfektion er helt givet den hyppigst forekommende blandt de seksuelt overførte sygdomme i de nordiske lande, og det er samtidig den almindeligste årsag til infertilitet hos kvinder. Sygdommen er ofte asymptomatisk.

For de traditionelle kønssygdomme, gonorré og syfilis, er der - målt over en 20-års periode - sket en markant nedgang i alle lande. Der er dog visse iøjnefaldende forskelle, hvor Grønland skiller sig helt ud fra de øvrige lande.

**Table 3.1.1 Percentage of daily smokers by sex 2004**

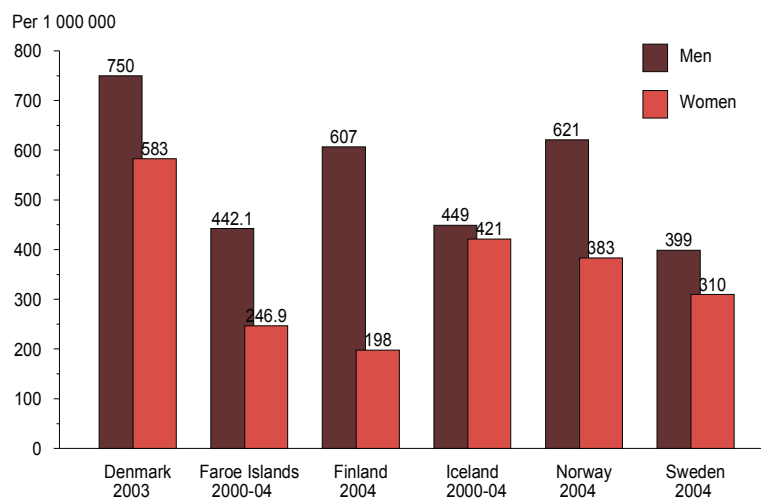
Daglige rygere procentvis efter køn 2004

|                                                                | Denmark | Faroe Islands | Finland | Iceland | Norway | Sweden |
|----------------------------------------------------------------|---------|---------------|---------|---------|--------|--------|
| Age Alder                                                      | 13+     | 15+           | 15-64   | 15-79   | 16-74  | 16-84  |
| <i>Smoking men as a percentage of men in the age group</i>     |         |               |         |         |        |        |
| Mænd, rygere, i pct. af mænd i aldersgruppen                   | 28      | 30            | 27      | 22      | 27     | 15     |
| <i>Smoking women as a percentage of women in the age group</i> |         |               |         |         |        |        |
| Kvinder, rygere, i pct. af kvinder i aldersgruppen             | 23      | 30            | 20      | 19      | 25     | 18     |

Sources: D: National Board of Health; FI: The National Council for Prevention; F: National Public Health Institute; I: Public Health Institute of Iceland; N: National Directorate for Health and Social Welfare; S: Statistics Sweden

**Figure 3.1.1 Rates for new cases of lung cancer per 1 000 000 inhabitants**

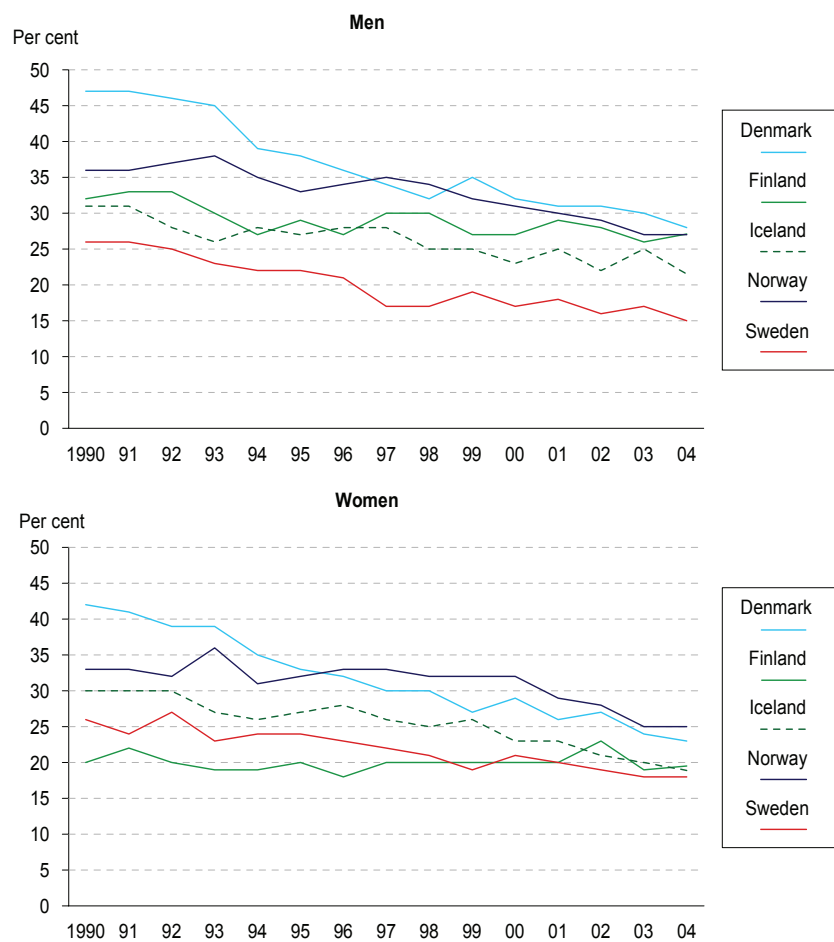
Rater for nye tilfælde af lungecancer pr. 1 000 000 indbyggere



Source: Tables 3.2.1 and 3.2.2

Kilde: Tabel 3.2.1 og 3.2.2

**Figure 3.1.2 Percentage of daily smokers by sex 1990–2004**  
Daglige rygere procentvis efter køn 1990–2004



Source: OECD, for 2001, 2002 and 2003 Table 3.1.1

**Table 3.1.2 Sales of alcoholic beverages in litres of 100 per cent pure alcohol per capita aged 15 years and over 1995–2004**

Salg af alkoholiske drikke i liter 100 pct. ren alkohol pr. indbygger 15 år og derover 1995–2004

|      | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------|---------|---------------|-----------|---------|-------|---------|--------|--------|
| 1995 | 12.1    | 6.3           | 12.6      | 8.3     | 5.8   | 4.8     | 4.8    | 6.1    |
| 2000 | 11.5    | 6.8           | 13.6      | 8.6     | 6.1   | 6.1     | 5.6    | 6.2    |
| 2003 | 11.5    | 6.9           | 11.6      | 9.3     | 6.4   | 6.5     | 6.0    | 7.0    |
| 2004 | 11.0    | 6.7           | 11.7      | 9.9     | 6.6   | 6.7     | 6.2    | 6.5    |

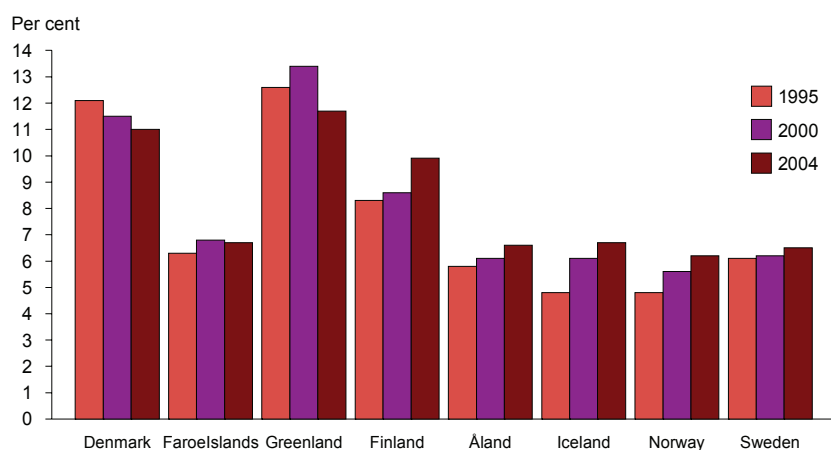
Sources: D, FI, G, I, N: The central statistical bureaus

Kilder: D, FI, G, I, N: De statistiske centralbureauer

F &amp; Å: STAKES; S: National Institute of Public Health

**Figure 3.1.3 Sales of alcoholic beverages in litres of 100 per cent pure alcohol per capita aged 15 years and over 1995, 2000 and 2004**

Salg af alkoholiske drikke i liter 100 pct. ren alkohol pr. indbygger 15 år og derover 1995, 2000 og 2004

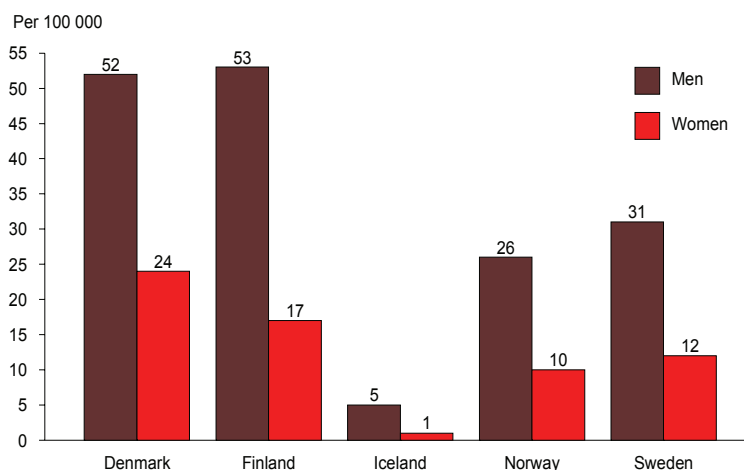


Sources: D, FI, G, I, N: The central statistical bureaus

Kilder: D, FI, G, I, N: De statistiske centralbureauer

F &amp; Å: STAKES; S: National Institute of Public Health

**Figure 3.1.4 Patients treated in somatic hospitals for alcoholic liver disease per 100 000 inhabitants 2004**  
 Patienter behandlet på somatiske sygehuse for alkoholisk leversygdom pr. 100 000 indbyggere 2004



Source: D: National Board of Health; FI: Ministry of Health; F: STAKES; I: Directorate of Health; N: Norwegian Patient Register; S: National Board of Health and Welfare

**Table 3.1.3 Diagnosed cases of tuberculosis per 100 000 inhabitants 1995–2004**  
 Diagnostiserede tilfælde af tuberkulose pr. 100 000 indbyggere 1995–2004

|              | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland <sup>1)</sup> | Norway <sup>2)</sup> | Sweden |
|--------------|---------|---------------|-----------|---------|-------|-----------------------|----------------------|--------|
| <i>Men</i>   |         |               |           |         |       |                       |                      |        |
| Mænd         |         |               |           |         | M+W   |                       |                      |        |
| 1995         | 9.8     | -             | 94.3      | 14.5    | 7.9   | 3.7                   | 6.4                  | 6.5    |
| 2000         | 12.1    | 21.7          | 50.0      | 12.3    | 3.9   | 2.8                   | 5.8                  | 5.2    |
| 2003         | 9.1     | 4.0           | 186.7     | 8.8     | 7.7   | 2.1                   | 8.0                  | 4.5    |
| 2004         | ..      | -             | 115.4     | 7.3     | -     | 4.8                   | 6.5                  | 5.4    |
| <i>Women</i> |         |               |           |         |       |                       |                      |        |
| Kvinder      |         |               |           |         |       |                       |                      |        |
| 1995         | 7.5     | 9.5           | 76.8      | 11.5    | .     | 3.7                   | 4.5                  | 6.3    |
| 2000         | 8.5     | 4.5           | 111.0     | 8.5     | .     | 5.7                   | 4.8                  | 5.2    |
| 2003         | 5.4     | -             | 126.9     | 7.1     | .     | 1.4                   | 6.9                  | 4.6    |
| 2004         | ..      | -             | 128.2     | 5.5     | .     | 2.7                   | 6.7                  | 4.9    |

1 New cases – relapses excluded.

2 Including relapses.

1 Nye tilfælde – eksklusive tilbagefald

2 Inklusive tilbagefald.

Sources: D: Statens Seruminstitut; FI: Chief Medical Officer; G: Chief Medical Officer; F & Å: National Public Health Institute; I: Directorate of Health; N: Norwegian Institute of Public Health; S: Swedish Institute for Infectious Disease Control

**Table 3.1.4 Confirmed new cases of HIV 1996-2004**

Påviste nye tilfælde af HIV 1996-2004

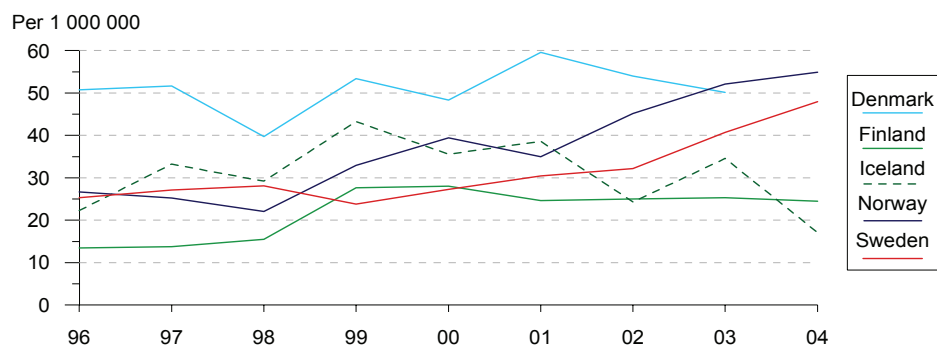
|              | Denmark | Faroe Islands | Greenland | Finland | Of which Åland | Iceland | Norway | Sweden |
|--------------|---------|---------------|-----------|---------|----------------|---------|--------|--------|
| <i>Men</i>   |         |               |           |         |                |         |        |        |
| Mænd         |         |               |           |         |                |         |        |        |
| 1996-00      | 180     | 0             | 6         | 76      | 0              | 6       | 81     | 155    |
| 2003         | 198     | 1             | 7         | 92      | -              | 6       | 145    | 226    |
| 2004         | ..      | -             | 4         | 103     | .              | 4       | 148    | 262    |
| <i>Women</i> |         |               |           |         |                |         |        |        |
| Kvinder      |         |               |           |         |                |         |        |        |
| 1996-00      | 80      | -             | 4         | 24      | 0              | 3       | 49     | 78     |
| 2003         | 72      | -             | 4         | 40      | 1              | 4       | 93     | 139    |
| 2004         | ..      | 2             | 2         | 25      | .              | 1       | 104    | 169    |
| <i>Total</i> |         |               |           |         |                |         |        |        |
| I alt        |         |               |           |         |                |         |        |        |
| 1996-00      | 260     | 0             | 9         | 102     | 0              | 9       | 130    | 233    |
| 2003         | 270     | 1             | 11        | 132     | 1              | 10      | 238    | 365    |
| 2004         | ..      | 2             | 6         | 128     | 2              | 5       | 252    | 431    |

Sources: See Table 3.1.3

Kilder: Se tabel 3.1.3

**Figure 3.1.5 Confirmed new cases of HIV per 1 000 000 inhabitants 1996-2004**

Påviste nye tilfælde af HIV per 1 000 000 indbyggere 1996-2004



Sources: See Table 3.1.3

Kilder: Se tabel 3.1.3

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.1.5 Notified cases of gonorrhoea and syphilis per 100 000 inhabitants aged 15 years and over 2004**

Anmeldte tilfælde af gonorré og syfilis pr. 100 000 indbyggere 15 år og derover 2004

|                   | Denmark <sup>1)</sup> | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-------------------|-----------------------|---------------|-----------|---------|-------|---------|--------|--------|
| <i>Gonorrhoea</i> |                       |               |           |         |       |         |        |        |
| Gonorré           |                       |               |           |         |       |         |        |        |
| Men               | 6.1                   | -             | 1 363.8   | 7.5     | 22.5  | 2.6     | 12.5   | 13.3   |
| Women             | 0.7                   | -             | 1 755.7   | 2.0     | 15.5  | 5.3     | 2.0    | 2.1    |
| Total             | 3.4                   | -             | 1 543.2   | 4.8     | 19.0  | 4.0     | 7.1    | 7.6    |
| <i>Syphilis</i>   |                       |               |           |         |       |         |        |        |
| Syfilis           |                       |               |           |         |       |         |        |        |
| Men               | 3.0                   | -             | 4.4       | 2.1     | 7.5   | 2.6     | 1.8    | 4.4    |
| Women             | 0.1                   | -             | ..        | 2.0     | -     | -       | 0.4    | 0.9    |
| Total             | 1.6                   | -             | 2.4       | 2.0     | 3.8   | 1.8     | 1.1    | 2.6    |
| 1 2003            |                       |               |           | 1 2003  |       |         |        |        |

Sources: See Table 3.1.3  
Kilder: Se tabel 3.1.3

**Table 3.1.6 Diagnosed cases of chlamydia per 100 000 inhabitants 1995-2004**

Diagnosticerede tilfælde af chlamydia pr. 100 000 indbyggere 1995-2004

|                      | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland <sup>1)</sup> | Norway | Sweden |
|----------------------|---------|---------------|-----------|---------|-------|-----------------------|--------|--------|
| <i>Men</i>           |         |               |           |         |       |                       |        |        |
| Mænd                 |         |               |           |         |       |                       |        |        |
| 1995                 | 124     | ..            | 1 509     | 138     | 48    | 368                   | 157    | 131    |
| 2000                 | 165     | ..            | 2 789     | 179     | 94    | 479                   | ..     | 187    |
| 2003                 | 220     | ..            | 2 486     | 186     | 131   | 424                   | ..     | 258    |
| 2004                 | ..      | ..            | 2 446     | 199     | ..    | 440                   | ..     | 314    |
| <i>Women</i>         |         |               |           |         |       |                       |        |        |
| Kvinder              |         |               |           |         |       |                       |        |        |
| 1995                 | 370     | ..            | 2 500     | 224     | 140   | 428                   | 276    | 192    |
| 2000                 | 384     | ..            | 4 802     | 271     | 206   | 781                   | ..     | 246    |
| 2003                 | 460     | ..            | 4 129     | 309     | 247   | 665                   | ..     | 337    |
| 2004                 | ..      | ..            | 4 099     | 316     | ..    | 698                   | ..     | 401    |
| <i>Men and women</i> |         |               |           |         |       |                       |        |        |
| Mænd og kvinder      |         |               |           |         |       |                       |        |        |
| 1995                 | 249     | 67            | 1 971     | 182     | 95    | 398                   | 217    | 156    |
| 2000                 | 276     | 79            | 3 727     | 226     | 151   | 647                   | 326    | 217    |
| 2003                 | 341     | 181           | 3 252     | 246     | 190   | 566                   | 358    | 299    |
| 2004                 | ..      | 304           | 3 214     | 256     | 354   | 568                   | 382    | 361    |

1 Notified cases. Since 1997 cases verified by laboratories. 1 Anmeldte tilfælde. Fra 1997 er det tilfælde der er verificeret via laboratorier.

Sources: See Table 3.1.3  
Kilder: Se tabel 3.1.3

### 3.2 Cancer

The Nordic countries have population-based cancer registers with centralized coding and classification. However, the coding is not centralized in Sweden.

Both external and internal factors that produce changes in the DNA material can cause cancer. Stimulants, foodstuffs, exposure to occupational hazards and factors in the environment have been shown to be cancer inducing.

The incidence of cancer increases with increasing age. Cancer is rare before the age of 30, where the incidence is 300 cases per 1 000 000 inhabitants. At the age of 70, the incidence is approximately 10 000 cases per 1 000 000 inhabitants. The annual number of cases of cancer is increasing in all the Nordic countries, and this trend remains after adjusting for differences in the size and age structure of the population.

The trend for cancer diseases in the Nordic countries remains analogous for most forms of cancer, but there are interesting differences. In general, the number of cases has increased with time, with a few exceptions of decreasing incidence such as cancer of the stomach. The decrease in the incidence of cancer of the cervix in the Nordic countries is related to the public screening programmes to detect pre-cancerous lesions and early lesions, and the ensuing treatment.

The incidence of breast cancer, cancer of the prostate and colorectal cancer is increasing in almost all countries. Dietary factors are probably significant for this development, but for cancer of the breast and prostate, hormonal factors also play an im-

### 3.2 Cancersygdomme

De nordiske lande har befolkningsbaserede cancerregistre med centraliseret kodning og klassifikation. Kodningen er dog ikke centraliseret i Sverige.

Årsagerne til kræft er både ydre og indre faktorer, som medfører ændringer i arvemassen. Nydelsesmidler, kostfaktorer, visse erhvervseksponeringer og faktorer i miljøet, har vist sig at være kræftfremkaldende.

Kræftforekomsten øges med stigende alder, og kræft er en sjælden sygdom før 30-års-alderen, hvor incidensen når 300 tilfælde per 1 000 000 indbyggere. Ved 70-års-alderen er det tilsvarende tal omkring 10 000 tilfælde per 1 000 000 indbyggere. Det årlige antal kræfttilfælde øges i samtlige nordiske lande, og denne tendens er stadig til stede, når der korrigeres for forskelle i befolkningsstørrelserne og alderssammensætningen.

Udviklingen i kræftsygdommene i de nordiske lande er analog for de fleste kræftformer, men der er interessante forskelle. Generelt er antallet af kræfttilfælde gennem tiden øget, med få undtagelser hvor forekomsten er faldende. Det gælder blandt andet for kræft i mavesækken. Forekomsten af livmoderhalskræft i de nordiske lande, skal ses i sammenhæng med befolkningsbaseret screening for forstadier og tidlig kræft, og disses behandling.

Bryst- og prostatacancer samt colorektal cancer stiger i næsten alle lande. Kostfaktorer er formentlig af væsentlig betydning for denne udvikling, men for bryst- og prostatacancer spiller hormonelle faktorer også en vigtig rolle. Forekomsten af

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portant role. The incidence of cancer of the testis is again increasing in most of the countries. The incidence of tobacco-related cancers, such as lung cancer, is high in all the countries. However, the incidence of lung cancer among men is decreasing.

testikelkræft er igen stigende i de fleste af landene. Forekomsten af tobaksrelaterede kræftformer, såsom lungecancer er høje i alle landene Det skal dog bemærkes, at lungekræft blandt mænd er faldende.

**Table 3.2.1 New cases of cancer per 1 000 000 inhabitants, men**

Nye tilfælde af cancer pr. 1 000 000 indbyggere, mænd

|                                   | <i>Total*</i><br>I alt* | <i>C62</i><br><i>Testis</i><br>Testikler | <i>C61</i><br><i>Prostate</i><br>Prostata | <i>C16</i><br><i>Stomach</i><br>Mave | <i>C18-21</i><br><i>Colon and</i><br><i>rectum</i><br>Tyktarm og<br>endetarm | <i>C25</i><br><i>Pancreas</i><br>Pancreas | <i>C33-34</i><br><i>Lungs</i><br>Lunger | <i>C43</i><br><i>Melanoma</i><br><i>of the skin</i><br>Melanom i<br>hud |
|-----------------------------------|-------------------------|------------------------------------------|-------------------------------------------|--------------------------------------|------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------|-------------------------------------------------------------------------|
| <i>Denmark<sup>1)</sup></i>       |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 5 626                   | 110                                      | 655                                       | 121                                  | 651                                                                          | 124                                       | 760                                     | 161                                                                     |
| 2003                              | 6 127                   | 103                                      | 893                                       | 120                                  | 709                                                                          | 134                                       | 750                                     | 200                                                                     |
| <i>Faroe Islands<sup>2)</sup></i> |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 3 586                   | 86                                       | 405                                       | 172                                  | 474                                                                          | 138                                       | 465                                     | 34                                                                      |
| 1999-03                           | 3 060                   | 107                                      | 329                                       | 99                                   | 387                                                                          | 132                                       | 345                                     | 8                                                                       |
| 2000-04                           | 3 332                   | 106                                      | 418                                       | 188                                  | 442                                                                          | 147                                       | 442                                     | 25                                                                      |
| <i>Greenland</i>                  |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 2 575                   | 54                                       | 54                                        | 207                                  | 237                                                                          | 130                                       | 681                                     | 15                                                                      |
| 2003                              | 2 839                   | 99                                       | 33                                        | 165                                  | 429                                                                          | 99                                        | 594                                     | -                                                                       |
| <i>Finland</i>                    |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 4 210                   | 34                                       | 1 201                                     | 176                                  | 391                                                                          | 130                                       | 602                                     | 122                                                                     |
| 2002                              | 4 608                   | 37                                       | 1 546                                     | 164                                  | 423                                                                          | 126                                       | 539                                     | 134                                                                     |
| 2003                              | 4 885                   | 40                                       | 1 658                                     | 166                                  | 451                                                                          | 145                                       | 607                                     | 140                                                                     |
| <i>Iceland</i>                    |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 4 108                   | 61                                       | 1 096                                     | 199                                  | 480                                                                          | 98                                        | 469                                     | 98                                                                      |
| 2000-04                           | 4 341                   | 61                                       | 1 290                                     | 146                                  | 481                                                                          | 96                                        | 449                                     | 134                                                                     |
| <i>Norway</i>                     |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 5 064                   | 108                                      | 1 293                                     | 182                                  | 687                                                                          | 124                                       | 580                                     | 206                                                                     |
| 2002                              | 5 164                   | 100                                      | 1 220                                     | 157                                  | 735                                                                          | 137                                       | 598                                     | 210                                                                     |
| 2003                              | 5 486                   | 108                                      | 1 477                                     | 163                                  | 731                                                                          | 132                                       | 621                                     | 209                                                                     |
| <i>Sweden</i>                     |                         |                                          |                                           |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 5 140                   | 55                                       | 1 528                                     | 156                                  | 600                                                                          | 101                                       | 381                                     | 183                                                                     |
| 2000                              | 5 361                   | 56                                       | 1 739                                     | 136                                  | 599                                                                          | 94                                        | 380                                     | 182                                                                     |
| 2003                              | 5 740                   | 54                                       | 2 036                                     | 136                                  | 645                                                                          | 98                                        | 374                                     | 216                                                                     |
| 2004                              | 5 999                   | 68                                       | 2 217                                     | 133                                  | 661                                                                          | 101                                       | 399                                     | 210                                                                     |

Numbers refer to ICD-10.

\* The total covers chapter C.

Totalen dækker kapitel C.

1 2003 are preliminary figures.

1 2003 er foreløbige tal.

2 Based on 5 year average discharges from the patient register.

2 Baseret på udskrivninger for 5 års gennemsnit fra patientregisteret.

Sources: The cancer registers in the Nordic countries

Kilder: De nordiske cancerregistre

G: Danish Cancer Society

**Table 3.2.2 New cases of cancer per 1 000 000 inhabitants, women**  
 Nye tilfælde af cancer pr. 1 000 000 indbyggere, kvinder

|                                   | <i>Total*</i><br>I alt* | <i>C50</i><br><i>Breast</i><br>Bryst | <i>C53</i><br><i>Cervix uteri</i><br>Livmoder-<br>hals | <i>C16</i><br><i>Stomach</i><br>Mave | <i>C18-21</i><br><i>Colon and</i><br><i>rectum</i><br>Tyktarm og<br>endetarm | <i>C25</i><br><i>Pancreas</i><br>Pancreas | <i>C33-34</i><br><i>Lungs</i><br>Lunger | <i>C43</i><br><i>Melanoma</i><br><i>of the skin</i><br>Melanom i<br>hud |
|-----------------------------------|-------------------------|--------------------------------------|--------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------|-------------------------------------------------------------------------|
| <i>Denmark<sup>1)</sup></i>       |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 6 021                   | 1 381                                | 160                                                    | 73                                   | 641                                                                          | 131                                       | 537                                     | 197                                                                     |
| 2003                              | 6 317                   | 1 469                                | 150                                                    | 68                                   | 621                                                                          | 126                                       | 583                                     | 253                                                                     |
| <i>Faroe Islands<sup>2)</sup></i> |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 3 946                   | 922                                  | 221                                                    | 101                                  | 470                                                                          | 175                                       | 267                                     | 37                                                                      |
| 1999-03                           | 3 869                   | 956                                  | 44                                                     | 89                                   | 363                                                                          | 204                                       | 230                                     | 18                                                                      |
| 2000-04                           | 4 047                   | 1 155                                | 150                                                    | 123                                  | 564                                                                          | 185                                       | 247                                     | 62                                                                      |
| <i>Greenland</i>                  |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 4 463                   | 467                                  | 352                                                    | 46                                   | 337                                                                          | 122                                       | 559                                     | 23                                                                      |
| 2003                              | 3 400                   | 453                                  | 189                                                    | 38                                   | 680                                                                          | 151                                       | 604                                     | -                                                                       |
| <i>Finland</i>                    |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 4 184                   | 1 281                                | 61                                                     | 140                                  | 419                                                                          | 138                                       | 179                                     | 115                                                                     |
| 2002                              | 4 352                   | 1 419                                | 52                                                     | 114                                  | 437                                                                          | 134                                       | 185                                     | 129                                                                     |
| 2003                              | 4 504                   | 1 421                                | 61                                                     | 129                                  | 439                                                                          | 175                                       | 198                                     | 132                                                                     |
| <i>Iceland</i>                    |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 3 947                   | 1 082                                | 105                                                    | 102                                  | 378                                                                          | 107                                       | 409                                     | 172                                                                     |
| 2000-04                           | 4 215                   | 1 195                                | 112                                                    | 95                                   | 395                                                                          | 71                                        | 421                                     | 218                                                                     |
| <i>Norway</i>                     |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 4 587                   | 1 077                                | 140                                                    | 113                                  | 710                                                                          | 140                                       | 311                                     | 223                                                                     |
| 2002                              | 4 943                   | 1 180                                | 133                                                    | 118                                  | 720                                                                          | 152                                       | 353                                     | 242                                                                     |
| 2003                              | 4 916                   | 1 183                                | 129                                                    | 103                                  | 750                                                                          | 131                                       | 383                                     | 237                                                                     |
| <i>Sweden</i>                     |                         |                                      |                                                        |                                      |                                                                              |                                           |                                         |                                                                         |
| 1996-00                           | 4 855                   | 1 366                                | 102                                                    | 98                                   | 567                                                                          | 109                                       | 249                                     | 182                                                                     |
| 2000                              | 4 954                   | 1 420                                | 100                                                    | 99                                   | 576                                                                          | 101                                       | 276                                     | 183                                                                     |
| 2003                              | 5 068                   | 1 519                                | 105                                                    | 86                                   | 602                                                                          | 105                                       | 296                                     | 205                                                                     |
| 2004                              | 5 143                   | 1 526                                | 96                                                     | 88                                   | 600                                                                          | 105                                       | 310                                     | 223                                                                     |

Numbers refer to ICD-10.

\* *The total covers chapter C.*  
 Totalen dækker kapitel C.

1 2003 are preliminary figures.

2 Based on 5 year average discharges from the patient register.

1 2003 er foreløbige tal.

2 Baseret på udskrivninger for 5 års gennemsnit fra patientregisteret.

Sources: *The cancer registers in the Nordic countries*  
 Kilder: De nordiske cancerregistre  
 G: Danish Cancer Society

**Table 3.2.3 New cases of leukemia per 1 000 000 inhabitants, 0-14 year-olds**  
 Nye tilfælde af leukæmi pr. 1 000 000 indbyggere, 0-14-årige

|                    | Denmark <sup>1)</sup> | Finland | Iceland <sup>2)</sup> | Norway | Sweden |
|--------------------|-----------------------|---------|-----------------------|--------|--------|
| <i>Boys Dreng</i>  |                       |         |                       |        |        |
| 1996-00            | 47                    | 47      | 48                    | 53     | 54     |
| 2003               | 40                    | 47      | 36                    | 58     | 56     |
| 2004               | ..                    | ..      | 30                    | ..     | 62     |
| <i>Girls Piger</i> |                       |         |                       |        |        |
| 1996-00            | 43                    | 50      | 25                    | 51     | 49     |
| 2003               | 41                    | 46      | 31                    | 54     | 41     |
| 2004               | ..                    | ..      | 31                    | ..     | 52     |
| <i>Total I alt</i> |                       |         |                       |        |        |
| 1996-00            | 45                    | 49      | 37                    | 53     | 52     |
| 2003               | 40                    | 47      | 34                    | 56     | 49     |
| 2004               | ..                    | ..      | 30                    | ..     | 57     |

The table covers the numbers C91-C95 in ICD-10.

Tabellen dækker numrene C91-C95 i ICD-10.

1 2003 are preliminary figures.

1 2003 er foreløbige tal.

2 Only five year averages are presented. Figures for single years may be unstable because of low population. 2003= average 1999-2003, 2004 = average 2000-2004.

2 Kun femårs gennemsnit præsenteres. Tal for enkelte år kan være ustabile på grund af lav population. 2003 = gennemsnit 1999-2003 og 2004 = 2000-2004

Sources: The cancer registers in the Nordic countries

Kilder: De nordiske cancerregistre

G: Danish Cancer Society

**Table 3.2.4 New cases of cancer of the colon and rectum per 1 000 000 inhabitants**  
 Nye tilfælde af cancer i tyktarm og endetarm pr. 1 000 000 indbyggere

|                      | Denmark <sup>1)</sup> | Faroe Islands | Greenland | Finland | Iceland | Norway | Sweden |
|----------------------|-----------------------|---------------|-----------|---------|---------|--------|--------|
|                      | 2003                  | 2000-04       | 2003      | 2003    | 2000-04 | 2003   | 2004   |
| <i>Men Mænd</i>      |                       |               |           |         |         |        |        |
| <i>Age Alder</i>     |                       |               |           |         |         |        |        |
| 0-24                 | -                     | -             | -         | 6       | 4       | 4      | 5      |
| 25-44                | 671                   | 88            | -         | 42      | 42      | 65     | 62     |
| 45-64                | 739                   | 804           | 853       | 491     | 545     | 790    | 603    |
| 65-84                | 3 733                 | 1 770         | 4 871     | 2 302   | 3 240   | 3 973  | 3 113  |
| 85+                  | 5 484                 | 4 228         | -         | 3 871   | 4 451   | 5 630  | 4 202  |
| <i>Women Kvinder</i> |                       |               |           |         |         |        |        |
| <i>Age Alder</i>     |                       |               |           |         |         |        |        |
| 0-24                 | -                     | -             | -         | 5       | -       | 8      | 8      |
| 25-44                | 49                    | -             | -         | 56      | 62      | 68     | 65     |
| 45-64                | 598                   | 915           | 1 971     | 399     | 447     | 716    | 497    |
| 65-84                | 2 537                 | 2 208         | 4 467     | 1 558   | 2 065   | 3 082  | 2 281  |
| 85+                  | 3 407                 | 3 366         | 14 085    | 2 798   | 3 221   | 4 282  | 2 576  |

1 Preliminary figures.

1 Foreløbige tal.

The table covers the numbers C18-21 in ICD-10.

Tabellen dækker numrene C18-21 i ICD-10.

Sources: The cancer registers in the Nordic countries

Kilder: De nordiske cancerregistre

G: Danish Cancer Society

**Table 3.2.5 New cases of lung cancer per 1 000 000 inhabitants**  
Nye tilfælde af lungecancer pr. 1 000 000 indbyggere

|                      | Denmark <sup>1)</sup> | Faroe Islands | Greenland | Finland | Iceland | Norway | Sweden |
|----------------------|-----------------------|---------------|-----------|---------|---------|--------|--------|
|                      | 2003                  | 2000-04       | 2003      | 2003    | 2000-04 | 2003   | 2004   |
| <i>Men Mænd</i>      |                       |               |           |         |         |        |        |
| <i>Age Alder</i>     |                       |               |           |         |         |        |        |
| 0-24                 | 1                     | -             | -         | 2       | -       | 1      | 2      |
| 25-44                | 47                    | -             | 97        | 21      | 42      | 21     | 23     |
| 45-64                | 923                   | 804           | 853       | 610     | 629     | 747    | 449    |
| 65-84                | 4 009                 | 2 155         | 7 655     | 3 375   | 2 994   | 3 515  | 1 910  |
| 85+                  | 2 340                 | 2 537         | -         | 4 431   | 1 590   | 2 739  | 1 095  |
| <i>Women Kvinder</i> |                       |               |           |         |         |        |        |
| <i>Age Alder</i>     |                       |               |           |         |         |        |        |
| 0-24                 | 5                     | -             | -         | -       | -       | 1      | 1      |
| 25-44                | 45                    | 34            | -         | 6       | 53      | 43     | 18     |
| 45-64                | 795                   | 398           | 1 380     | 201     | 741     | 518    | 490    |
| 65-84                | 2 392                 | 1 137         | 5 743     | 743     | 2 040   | 1 599  | 1 044  |
| 85+                  | 770                   | -             | -         | 981     | 1 393   | 685    | 333    |

1 Preliminary figures.

1 Foreløbige tal.

The table covers the numbers C33-34 in ICD-10.  
Tabellen dækker numrene C33-34 i ICD-10.

Sources: The cancer registers in the Nordic countries  
Kilder: De nordiske cancerregistre  
G: Danish Cancer Society

**Table 3.2.6 New cases of cancer of the cervix uteri per 1 000 000 women**  
Nye tilfælde af livmoderhalscancer pr. 1 000 000 kvinder

|                  | Denmark <sup>1)</sup> | Faroe Islands | Greenland | Finland | Iceland | Norway | Sweden |
|------------------|-----------------------|---------------|-----------|---------|---------|--------|--------|
|                  | 2003                  | 2000-04       | 2003      | 2003    | 2000-04 | 20003  | 2004   |
| <i>Age Alder</i> |                       |               |           |         |         |        |        |
| 0-24             | 5                     | -             | -         | 1       | 8       | 4      | 6      |
| 25-44            | 215                   | 103           | 231       | 71      | 211     | 194    | 144    |
| 45-64            | 181                   | 278           | 591       | 58      | 140     | 184    | 117    |
| 65-84            | 246                   | 468           | -         | 136     | 112     | 177    | 139    |
| 85+              | 228                   | -             | -         | 225     | 348     | 125    | 129    |

1 Preliminary figures.

1 Foreløbige tal.

The table covers the number C53 in ICD-10.  
Tabellen dækker numrene C53 i ICD-10.

Sources: The cancer registers in the Nordic countries  
Kilder: De nordiske cancerregistre  
G: Danish Cancer Society

**Table 3.2.7 New cases of cancer of the testis per 1 000 000 men**  
 Nye tilfælde af testikelcancer pr. 1 000 000 mænd

|              | Denmark <sup>1)</sup> | Faroe Islands | Greenland | Finland | Iceland | Norway | Sweden |
|--------------|-----------------------|---------------|-----------|---------|---------|--------|--------|
|              | 2003                  | 2000-04       | 2003      | 2003    | 2000-04 | 2003   | 2004   |
| <i>Age</i>   |                       |               |           |         |         |        |        |
| <i>Alder</i> |                       |               |           |         |         |        |        |
| 0-24         | 38                    | 66            | 87        | 30      | 25      | 39     | 31     |
| 25-44        | 237                   | 206           | -         | 85      | 137     | 238    | 171    |
| 45-64        | 68                    | 70            | 284       | 19      | 45      | 82     | 35     |
| 65-84        | 23                    | 77            | -         | 10      | 14      | 35     | 10     |
| 85+          | -                     | -             | -         | -       | -       | 38     | -      |

1 Preliminary figures.

1 Foreløbige tal.

The table covers the number C62 in ICD-10.

Tabellen dækker nummer C62 i ICD-10.

Sources: The cancer registers in the Nordic countries

Kilder: De nordiske cancerregistre

G: Danish Cancer Society

**Table 3.2.8 New cases of melanoma of the skin per 1 000 000 inhabitants**  
 Nye tilfælde af melanom i hud pr. 1 000 000 indbyggere

|                      | Denmark <sup>1)</sup> | Faroe Islands | Finland | Iceland | Norway | Sweden |
|----------------------|-----------------------|---------------|---------|---------|--------|--------|
|                      | 2003                  | 2000-04       | 2003    | 2000-04 | 2003   | 2004   |
| <i>Men Mænd</i>      |                       |               |         |         |        |        |
| <i>Age Alder</i>     |                       |               |         |         |        |        |
| 0-24                 | 13                    | -             | 10      | 18      | 11     | 6      |
| 25-44                | 115                   | 29            | 62      | 123     | 82     | 97     |
| 45-64                | 323                   | 35            | 216     | 220     | 348    | 301    |
| 65-84                | 564                   | 77            | 461     | 405     | 743    | 655    |
| 85+                  | 978                   | -             | 662     | 477     | 989    | 917    |
| <i>Women Kvinder</i> |                       |               |         |         |        |        |
| <i>Age Alder</i>     |                       |               |         |         |        |        |
| 0-24                 | 29                    | -             | 6       | 68      | 11     | 18     |
| 25-44                | 232                   | 68            | 87      | 331     | 186    | 177    |
| 45-64                | 363                   | -             | 177     | 320     | 358    | 304    |
| 65-84                | 471                   | 268           | 295     | 211     | 558    | 472    |
| 85+                  | 684                   | 421           | 547     | 348     | 576    | 537    |

1 Preliminary figures.

1 Foreløbige tal.

The table covers the number C43 in ICD-10.

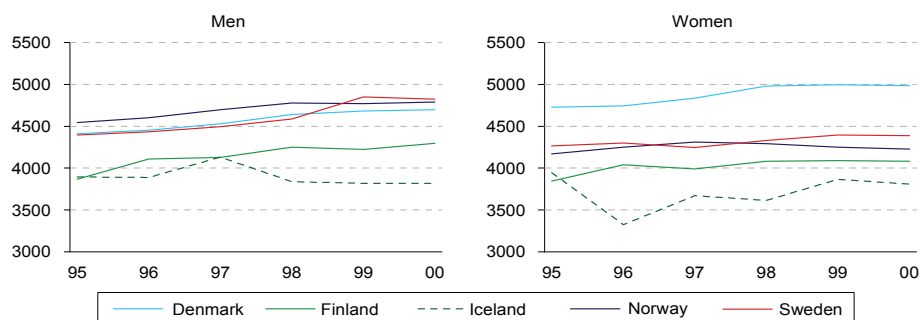
Tabellen dækker nummer C43 i ICD-10.

Sources: The cancer registers in the Nordic countries

Kilder: De nordiske cancerregistre

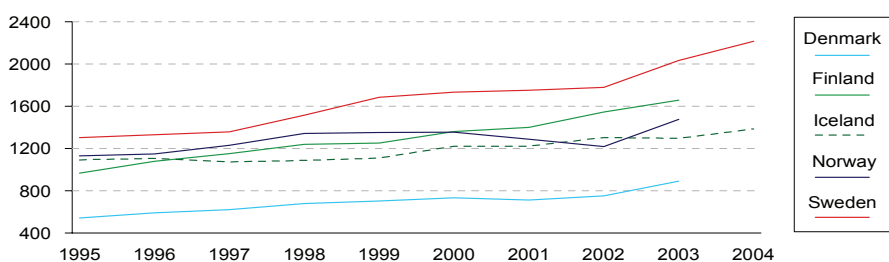
G: Danish Cancer Society

**Figure 3.2.1 New cases of cancer per 1 000 000 inhabitants 1995-2004**  
Nye tilfælde af cancer pr. 1 000 000 indbyggere 1995-2004



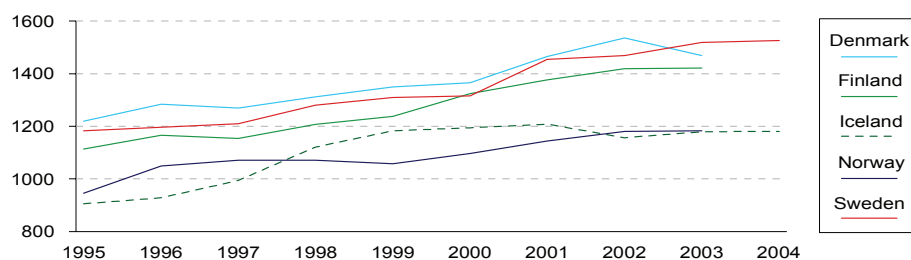
Sources: The Nordic Cancer Union  
Kilder: Den nordiske cancerunion

**Figure 3.2.2 New cases of prostate cancer per 1 000 000 inhabitants 1995-2004**  
Nye tilfælde af prostatacancer pr. 1 000 000 indbyggere 1995-2004



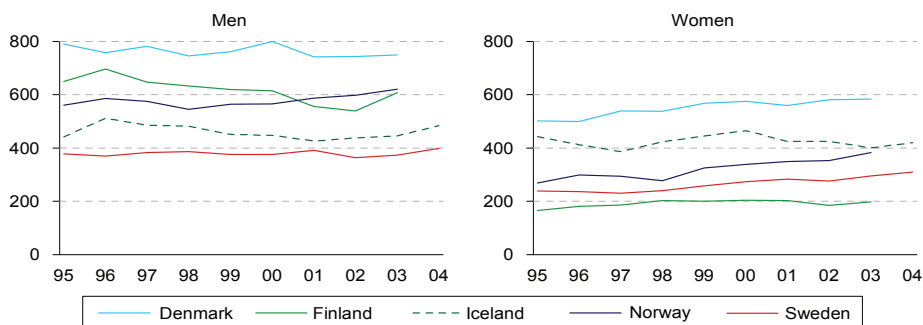
Sources: See Table 3.2.1  
Kilder: Se tabel 3.2.1

**Figure 3.2.3 New cases of breast cancer per 1 000 000 inhabitants 1995-2004**  
 Nye tilfælde af brystcancer pr. 1 000 000 indbyggere 1995-2004



Sources: See Table 3.2.2  
 Kilder: Se tabel 3.2.2

**Figure 3.2.4 New cases of lung cancer per 1 000 000 inhabitants 1995-2004**  
 Nye tilfælde af lungecancer pr. 1 000 000 indbyggere 1995-2004



Sources: See Table 3.2.1 and 3.2.2  
 Kilder: Se tabel 3.2.1 og 3.2.2

### 3.3 Medical consultations and immunization schedules

In the Nordic countries, primary health services are organized and financed by the public sector.

However, the degree of decentralization varies, also regarding the relationship between private general practitioners and those publicly employed in the primary health care sector.

There are also differences in the level of integration of medical treatment, nursing, physiotherapy, etc. Similar differences are also found for home nursing and home help.

The registration practice for medical consultations differs substantially from country to country.

Normally, patients visit the physician in his/her practice. But in all countries consultations can be telephone consultations, home visits by a physician, and treatment in emergency wards.

In 1997, NOMESCO carried out a pilot study of reasons for contact between patients and general practitioners in the five Nordic countries. This study was repeated in 2006, but for all non-admitted patients, both in hospitals and outside hospitals. The results of this survey are presented in Section B of this publication. Even though the results should be interpreted with caution, the report substantiates conditions already known, such as that registration practice differs between the Nordic countries, partly due to the payment systems and partly be-

### 3.3 Lægebesøg og vaccinationsprogrammer

I de nordiske lande er det primære sundhedsvæsen forankret og finansieret af den offentlige sektor.

Men graden af decentralisering varierer, hvilket også gælder for forholdet mellem privatpraktiserende og offentligt ansatte læger i det primære sundhedsvæsen.

Der er endvidere forskel på integrationsgraden af lægebehandling, sygepleje, fysioterapi m.v. Lignende forskelle findes også for hjemmesygeplejen og hjemme-hjælpen.

Registreringspraksis for lægebesøg er meget forskellig fra land til land.

Det er det mest almindelige, at patienterne opsøger lægen i lægekonsultationen, men i alle landene praktiseres der også via telefonkonsultationer, lægebesøg i hjemmet og skadestuebehandling.

I 1997 gennemførte NOMESCO en pilotundersøgelse om kontaktårsagerne i almen praksis i de fem nordiske lande. Denne undersøgelse er gentaget i 2006, men for alle patienter både ved og udenfor sygehusene der ikke bliver indlagt. Resultaterne af denne undersøgelse er medtaget som Sektion B i denne rapport. Selv om de fundne resultater må tages med forbehold, underbygger rapporten de kendte forhold om at registreringspraksis er forskellig i de nordiske lande hvilket dels afspejler betalingsreglerne og

cause of organizational differences. All contacts in Denmark are registered as medical contacts, because of the payment system, whereas some of the contacts in the other countries are registered or non-registered contacts with other health care personnel. In particular there are differences between the countries with regard to check-ups for mothers and infants. Along with other factors, this means that the statistics on medical consultations are not directly comparable between the Nordic countries.

All Nordic countries have recommended immunization programmes with some differences in vaccination against tuberculosis and whooping cough, and the choice of vaccines against measles and rubella.

Collection of data on immunization varies a lot from country to country, and none of the countries except Norway have immunization registers covering the country as a whole.

dels organisatoriske forskelle. Alle kontakter i Danmark registreres således som lægekontakter, på grund af betalingssystemet, mens en del af kontakterne i de andre lande er registrerede/ikke registrerede kontakter med andet sundhedspersonale. Her er det især kontrol af mødre og spædbørn der er en stor forskel mellem landene. Blandt andet disse forhold gør at statistikken om lægebesøg ikke er sammenlignelig mellem de nordiske lande.

Alle nordiske lande har anbefalede vaccinationsprogrammer med visse forskelle i vaccination mod tuberkulose, kighoste og valget af vaccine mod henholdsvis mæslinger og røde hunde.

Dataindsamlingen for vaccinationerne varierer meget fra land til land, og ingen af landene, bortset fra Norge, har vaccinationsregistre der dækker hele landet.

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.3.1 Medical consultations<sup>1)</sup> 2004**  
Lægekonsultationer<sup>1)</sup> 2004

|                                                      | Denmark | Finland | Iceland <sup>2)</sup> | Sweden <sup>3)</sup> |
|------------------------------------------------------|---------|---------|-----------------------|----------------------|
| <i>Total number of consultations (millions)</i>      |         |         |                       |                      |
| Konsultationer i alt (mill.)                         | 23.9    | 22.1    | 1.7                   | 25.2                 |
| of which:<br>heraf:                                  |         |         |                       |                      |
| <i>Consultations with a general practitioner</i>     |         |         |                       |                      |
| Besøg hos alment praktiserende læge i konsultationen | 19.7    | 11.6    | 0.8                   | 11.9                 |
| <i>Consultations with a specialist</i>               |         |         |                       |                      |
| Besøg hos specialist                                 | 4.2     | 10.5    | 0.9                   | 13.3                 |
| <i>Consultations per capita</i>                      |         |         |                       |                      |
| Besøg pr person                                      | 4.4     | 4.2     | 5.8                   | 2.8                  |

1 Excl. consultations by telephone, home visits by physicians. Consultations with a specialist include out-patient treatment in hospitals.

2 Preliminary figures.

3 Incl. home visits, incl. consultations in day care at hospitals.

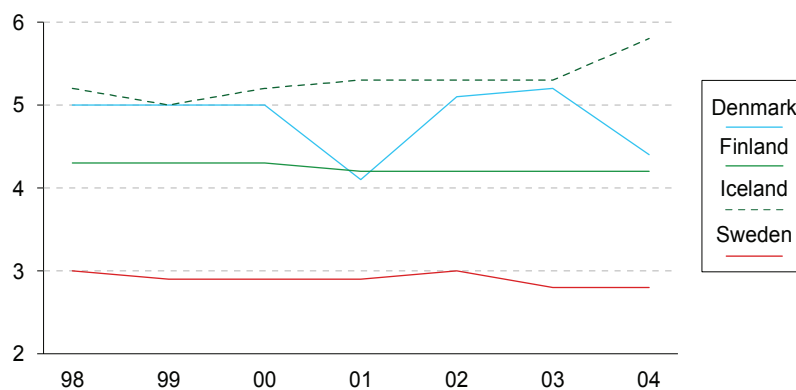
1 Ekskl. telefonkonsultationer, lægebesøg i hjemmet. Besøg hos specialister omfatter også ambulant behandling på sygehuse.

2 Foreløbige tal

3 Inkl. hjemmebesøg, inkl. dagbehandling på hospitaler.

Sources: D: National Board of Health; F: STAKES; I: Directorate of Health; S: Swedish Association of Local Authorities and Regions.

**Figure 3.3.1 Consultations per capita 1998–2004**  
Konsultationer pr. person 1998–2004



Sources: See Table 3.3.1

Kilder: Se tabel 3.3.1

**Table 3.3.2 Children under the age of two immunized according to immunization schedules (per cent) 2004**

Børn under to år vaccineret i henhold til det anbefalede vaccinationsprogram (pct.) 2004

|                   | Denmark <sup>1)</sup> | Faroe Islands <sup>1)</sup> | Finland | Iceland | Norway <sup>2)</sup> | Sweden |
|-------------------|-----------------------|-----------------------------|---------|---------|----------------------|--------|
| <i>BCG</i>        |                       |                             |         |         |                      |        |
| Tuberkulose       | -                     | -                           | 99      | -       | ..                   | 16     |
| <i>Pertussis</i>  |                       |                             |         |         |                      |        |
| Kighoste          | 96                    | 99                          | 97      | 97      | 92                   | 98     |
| <i>Tetanus</i>    |                       |                             |         |         |                      |        |
| Stivkrampe        | 96                    | 99                          | 97      | 97      | 92                   | 99     |
| <i>Diphtheria</i> |                       |                             |         |         |                      |        |
| Difteri           | 96                    | 99                          | 97      | 97      | 92                   | 99     |
| <i>Polio</i>      |                       |                             |         |         |                      |        |
| Polio             | 96                    | 99                          | 97      | 97      | 92                   | 98     |
| <i>Rubella</i>    |                       |                             |         |         |                      |        |
| Røde hunde        | 96                    | 91                          | 97      | 94      | 89                   | 93     |
| <i>Measles</i>    |                       |                             |         |         |                      |        |
| Mæslinger         | 96                    | 91                          | 97      | 94      | 89                   | 93     |

1 2003.

2 The figures are underestimated due to low reporting in some municipalities.

1 2003.

2 Tallene er underestimerede på grund af lav indberetning i nogle kommuner.

Source: WHO/EPI; D: Statens Seruminstitut; FI: Ministry of Health and Social Affairs; F: National Public Health Institute; I: Directorate of Health; N: Norwegian Institute of Public Health; S: Swedish Institute for Infectious Disease Control

**Table 3.3.3 Recommended immunization schedules per 1 January, 2006**

|                             | <i>Denmark</i>                   | <i>Finland</i>                        | <i>Iceland</i>                    | <i>Norway</i>                                           | <i>Sweden</i>                      |
|-----------------------------|----------------------------------|---------------------------------------|-----------------------------------|---------------------------------------------------------|------------------------------------|
| BCG                         | -                                | < 7 days                              | -                                 | Risk groups: First week of life. Negatives: 13-14 years | Risk groups                        |
| Pertussis                   | 3, 5 and 12 months and 5 years   | 3, 5 and 12 months, 4 and 14-15 years | 3, 5, 12 months and 5 years       | 3, 5 and 11-12 months                                   | 3, 5 and 12 months, 10 years       |
| Tetanus                     | 3, 5 and 12 months and 5 years   | 3, 5 and 12 months, 4 and 14-15 years | 3, 5, 12 months, 5 and 14 years   | 3, 5 and 11-12 months, 11-12 years                      | 3, 5 and 12 months, 10 years       |
| Diphtheria                  | 3, 5 and 12 months and 5 years   | 3, 5 and 12 months, 4 and 14-15 years | 3, 4, 12 months, 5 and 14 years   | 3, 5 and 11 months, 11-12 years                         | 3, 5 and 12 months, 10 years       |
| Polio                       | IPV: 3, 5, 12 months and 5 years | IPV: 3, 5 and 12 months, and 4 years  | IPV: 3, 5, 12 months and 14 years | IPV: 3, 5 and 11 months, 6-8 and 14 years               | IPV: 3, 5 and 12 months, 5-6 years |
| Measles, Mumps, Rubella     | 15 months. 12 years              | 14-18 months and 6 years              | 18 months and 12 years            | 15 months and 12-13 years                               | 18 months and 12 years             |
| Rubella, only               | Women of fertile age             | -                                     |                                   | Seronegative women of fertile age                       | -                                  |
| Measles, only               | -                                | -                                     | -                                 | -                                                       | -                                  |
| Haemophilus influenzae b    | 3, 5 and 12 months               | 3, 5 and 12 months                    | 3, 5 and 12 months                | 3, 5 and 11 months                                      | 3, 5 and 12 months                 |
| Meningococcal disease gr. C |                                  |                                       | 6, 8 months                       |                                                         |                                    |

IPV = Inactivated polio vaccine      The Faroe Islands, Greenland and Åland have the same immunization schedules as Denmark and Finland respectively. In Greenland, however, BCG is included.

Sources: WHO/EPID: Statens seruminstitut; F: National Public Health Institute; I: Directorate of Health; N: Norwegian Institute of Public Health; S: The National Board of Health and Welfare

Tabel 3.3.3 Anbefalede vaccinationsprogrammer pr. 1. januar 2006

|                                 | Danmark                                                                                                                                                       | Finland                           | Island                           | Norge                                                  | Sverige                         |
|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------|--------------------------------------------------------|---------------------------------|
| Tuberkulose                     | -                                                                                                                                                             | <7 dage                           | -                                | Risikogrupper:<br>Første leveuge<br>Negative: 13-14 år | Risikogrupper                   |
| Kighoste                        | 3, 5 og 12 måneder og 5 år                                                                                                                                    | 3, 5 og 12 måneder, 4 og 14-15 år | 3, 5, 12 måneder og 5 år         | 3, 5 og 11-12 måneder                                  | 3, 5 og 12 måneder, 10 år       |
| Stivkrampe                      | 3, 5 og 12 måneder og 5 år                                                                                                                                    | 3, 5 og 12 måneder, 4 og 14-15 år | 3, 5, 12 måneder, 5 år og 14 år, | 3, 5 og 11-12 måneder, samt 11-12 år                   | 3, 5 og 12 måneder, 10 år       |
| Difteri                         | 3, 5 og 12 måneder og 5 år                                                                                                                                    | 3, 5 og 12 måneder, 4 og 14-15 år | 3, 4, 12 måneder, 5 og 14 år     | 3, 5 og 11 måneder samt 11-12 år                       | 3, 5 og 12 måneder, 10 år       |
| Polio                           | IPV: 3, 5, 12 måneder og 5 år                                                                                                                                 | IPV: 3, 5 og 12 måneder + 4 år    | IPV: 3, 5, 12 måneder og 14 år   | IPV: 3, 5 og 11 måneder, 6-8 år og 14 år               | IPV: 3, 5 og 12 måneder, 5-6 år |
| Mæslinger, fåresyge, røde hunde | 15 måneder, 12 år                                                                                                                                             | 14-18 måneder og 6 år             | 18 måneder og 12 år              | 15 måneder og 12-13 år                                 | 18 måneder og 12 år             |
| Røde hunde, alene               | Kvinder i den fertile alder                                                                                                                                   | -                                 |                                  | Seronegative kvinder i den fertile alder               | -                               |
| Mæslinger, alene                | -                                                                                                                                                             | -                                 | -                                | -                                                      | -                               |
| Haemophilus influenzae b        | 3, 5 og 12 måneder                                                                                                                                            | 3, 5 og 12 måneder                | 3, 5 og 12 måneder               | 3, 5 og 11 måneder                                     | 3, 5 og 12 måneder              |
| Meningitis                      | -                                                                                                                                                             | -                                 | 6, 8 måneder                     | -                                                      | -                               |
| IPV = Inaktiveret polio vaccine | Færøerne, Grønland og Åland har de samme vaccinationsprogrammer som henholdsvis Danmark og Finland. Vaccination mod tuberkulose er dog inkluderet i Grønland. |                                   |                                  |                                                        |                                 |
| Kilder:                         | WHO/EPID: Statens Seruminstitut; F: Folkhälsoinstitutet; I: Landlæknisembættið; N: Nasjonalt folkehelseinstitut; S: Socialstyrelsen                           |                                   |                                  |                                                        |                                 |

### 3.4 Discharges, patients treated and average length of stay

In this section, data on treatment in hospitals are presented, with data from selected diagnostic groups. The statistics based on diagnosis are first presented with the total number of discharges from hospitals, the average length of stay, and the number of patients who have been treated during the year, according to the main chapters of ICD-10. Then follow tables on hospital discharges, patients treated and average length of stay for 10 selected diagnostic groups.

The statistics from the patient registers in the five Nordic countries show some large differences between the countries that cannot solely be attributed to differences in disease patterns. For this reason, in 2000 NOMESCO performed a validity study of the diagnosis-related patient statistics. The results of this study were presented as a theme section in the 2000 version of this publication. A similar study of the surgical procedure statistics was presented in the 2002 publication. In the 2003 publication, a similar study of day surgery was presented.

From the diagnosis-related statistics, it can be seen that there is a certain variation in diagnosis and coding among the Nordic countries, in spite of the fact that they use the same classification system. The validity study identified different diagnostic cultures, differences in medical treatment and differences in the way in which treatment is organized.

The quality of the data in the patient registers, such as representativity, completeness and reliability, is important for these

### 3.4 Udskrivninger, patienter behandlet og gennemsnitlig liggetid

I dette afsnit gives der data for behandlingen ved sygehuse med data fra udvalgte diagnosegrupper. Den diagnosebaserede statistik vises først med det samlede antal udskrivninger, den gennemsnitlig liggetid, samt patienter der er behandlet i løbet af året, fordelt efter ICD-10's hovedkapitler. Herefter kommer tabeller om patienter behandlet og udskrivninger samt den gennemsnitlige liggetid for 10 udvalgte diagnosegrupper.

Statistikken fra patientregistrene i de fem nordiske lande viser en del store forskelle mellem landene som ikke alene kan tilskrives forskelle i sygdomsforekomsten hvorfor NOMESCO i 2000 gennemførte et validitetsstudium af den diagnoserelaterede patientstatistik. Resultaterne herfra var medtaget som temasektion i 2000 udgaven af denne publikation. Et tilsvarende studie af procedure/operationsstatistikken blev medtaget i 2002 udgaven. I 2003 udgaven var der medtaget et tilsvarende studie af dagkirurgi.

Det der kan konstateres ved den diagnoserelaterede statistik er, at der er en vis variation i diagnosticeringen og kodningen mellem de nordiske lande til trods for at man anvender den samme klassifikation. I validitetsstudiet blev der peget på forskellige diagnostiske kulturer, forskelle i den medicinske behandling samt forskelle i den måde hvorpå behandlingen er organiseret.

Det som kan spille en væsentlig rolle for statistikken er kvaliteten af de data der findes i patientregistrene, såsom repræsentati-

statistics. The general picture in this respect is that the Nordic data have a high degree of coverage. In order to make the figures as comparable as possible, the data presented in this publication are from somatic hospital wards in general hospitals and specialist somatic hospitals. For Norway, however, it is not possible to present data for hospital wards, only for hospitals, which means that the Norwegian data are an underestimation compared to the data from the other countries.

However, it should be noted that the statistics concerning discharges, average length of stay and number of patients treated during the year are presented according to main diagnosis/diagnostic group. This means that the patient statistics do not represent all the individual cases of illness at the time of admittance, but only the diagnosis that was the main reason for the patient's admittance to/treatment in a hospital. The concept main diagnosis has been well defined by the WHO, but there is a certain variation among the Nordic countries in the way in which the main diagnosis is interpreted. In the national statistics there are also secondary diagnoses, but as these are different in the national systems of registration, statistics on the number of cases of the individual diagnoses are not comparable.

The figures for the Faroe Islands and Greenland are slightly under-estimated, since they are partly included in the Danish statistics.

Another important aspect is changes in the statistics in connection with the change in the classification. This is described in detail in Chapter 5 together with the causes of death. Today, all five Nordic countries use ICD-10, so that comparability is only a

vitet, fuldstændighed og pålidelighed. Her er det generelle billede at de nordiske data har en høj dækningsgrad. For at gøre tallene så sammenlignelige som muligt er de data der vises i denne publikation fra somatiske hospitalsafdelinger på almindelige sygehuse samt somatiske specialsygehuse. For Norges vedkommende er det imidlertid ikke muligt at give data fra sygehusafdelinger men kun sygehuse i sin helhed, hvilket gør at de norske data er underestimerede sammenlignet med de andre lande.

Det som man imidlertid må være opmærksom på er, at statistikken om udskrivninger, gennemsnitlig liggetid samt personer der er behandlet i løbet af året er opgjort efter hoveddiagnose/diagnosegruppe. Det betyder at patientstatistikken ikke viser alle forekomster af de enkelte sygdomstilfælde ved indlæggelse, men kun den diagnose der var hovedårsagen til at den pågældende blev indlagt/behandlet ved et hospital. Begrebet hoveddiagnose er veldefineret af WHO, men der findes en vis variation mellem de nordiske lande i hvorledes hoveddiagnosen tolkes. I de nationale statistikker findes der også bi-diagnoser, men da omfanget af disse er forskellige i de nationale registreringssystemer, vil statistik der tæller forekomsten af de enkelte diagnoser ikke give et sammenligneligt billede.

De Færøske og Grønlandske tal er noget underestimerede da de delvis indgår i den danske statistik.

Et andet væsentligt aspekt er ændringer i statistikken ved klassifikationsskiftet. Dette er omfattende beskrevet i kapitel 5 sammen med dødsårsagerne. I dag anvender alle 5 nordiske lande ICD-10 hvorfor det kun er i de historiske data der

problem in the historic data. For example, the present Tables 3.4.1-3.4.3, calculated according to the main chapters in ICD-10, are not completely comparable with the previous corresponding tables calculated according to the main chapters in ICD-9.

When evaluating the statistics it is important to note that the wrong diagnosis may have been made, or the wrong code may have been used for the correct diagnosis. Nordic studies show, however, that when it comes to the main diagnosis, validity is good.

In several countries the introduction of diagnosis related groups (DRG) has been seen to influence diagnosis in hospitals, for example more secondary diagnoses are registered and the choice of main diagnosis has changed in certain cases.

One last aspect is the different ways in which countries organize their hospital sectors, including differences in treatment practice. Differences are typically seen in the extent of out-patient versus in-patient treatment.

Finally, it must be mentioned that there are great differences in the use of Z codes for factors that have significance for health status. In particular, codes Z03 and Z50 are used in Denmark.

kan komme brist i sammenligneligheden. De nuværende tabeller 3.4.1-3.4.3 opgjort efter ICD-10's hovedkapitler kan eksempelvis ikke helt sammenlignes med de tidligere tilsvarende tabeller opgjort efter ICD-9's hovedkapitler.

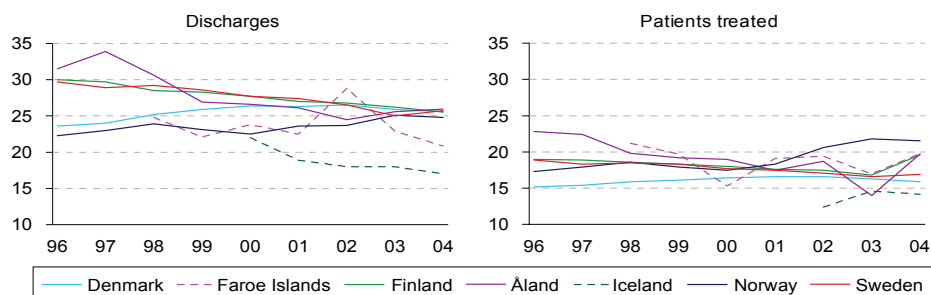
Ved vurderingen af statistikken skal man også være opmærksom på, at der kan være oplyst forkert diagnose ligesom der kan være anvendt forkert kode til korrekt oplyst diagnose. Nordiske studier viser dog, at når det gælder hoveddiagnosen er der en god validitet.

Indførslen af de diagnoserelaterede grupperinger (DRG) har i flere lande vist sig at påvirke diagnosticeringen ved sygehuse, blandt andet ved at flere bidiagnoser registreres og valget af hoveddiagnose i visse tilfælde ændres.

Et sidste forhold der gør sig gældende er landenes forskelle i organiseringen af sygehusvæsenet og herunder også forskelle i behandlingspraksis. Her kan der typisk være forskelle med hensyn til omfanget af ambulant behandling eller om behandlingen foregår under indlæggelse.

Endelig skal det nævnes, at der er stor forskel på hvor meget man anvender Z-koderne for faktorer der har betydning for sundhedstilstanden hvor især Danmark anvender Z03 og Z50.

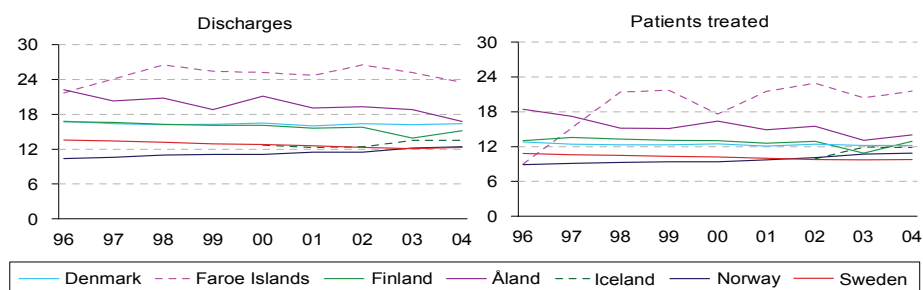
**Figure 3.4.1 Discharges from hospitals and patients treated during the year for diseases of the circulatory system, per 1 000 inhabitants 1996-2004**  
 Udskrivninger og parienter behandlet i løbet af året for sygdomme i kredsløbsorganer, pr. 1 000 indbyggere 1996-2004



Sources: See Tables 3.4.1 and 3.4.3

Kilder: Se tabel 3.4.1 og 3.4.3

**Figure 3.4.2 Discharges from hospitals and patients treated during the year for diseases of the digestive system, per 1 000 inhabitants 1996-2004**  
 Udskrivninger og patienter behandlet for sygdomme i løbet af året i fordøjelsessystemet, pr. 1 000 indbyggere 1996-2004



Sources: See Tables 3.4.1 and 3.4.3

Kilder: Se tabel 3.12 og 3.14

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.4.1 Discharges from hospitals\* by main diagnostic group, per 1 000 inhabitants 2004**

|                                                                                                  | <i>Denmark</i> | <i>Faroe Islands<sup>1)</sup></i> | <i>Finland<sup>2)</sup></i> | <i>Åland<sup>1)2)</sup></i> |
|--------------------------------------------------------------------------------------------------|----------------|-----------------------------------|-----------------------------|-----------------------------|
| Certain infectious and parasitic diseases                                                        | 5.2            | 4.6                               | 4.3                         | 6.1                         |
| Neoplasms                                                                                        | 18.9           | 18.9                              | 21.8                        | 14.0                        |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune system | 3.0            | 3.9                               | 1.3                         | 0.9                         |
| Endocrine, nutritional and metabolic diseases                                                    | 4.8            | 4.9                               | 2.6                         | 3.2                         |
| Mental and behavioural disorders                                                                 | 3.0            | 9.5                               | 7.3                         | 2.8                         |
| Diseases of the nervous system                                                                   | 4.8            | 5.9                               | 7.6                         | 11.3                        |
| Diseases of the eye and adnexa                                                                   | 2.5            | 6.3                               | 12.5                        | 5.0                         |
| Diseases of the ear and mastoid process                                                          | 1.0            | 3.1                               | 2.7                         | 3.1                         |
| Diseases of the circulatory system                                                               | 25.6           | 23.1                              | 25.5                        | 26.0                        |
| Diseases of the respiratory system                                                               | 17.2           | 14.4                              | 13.3                        | 17.9                        |
| Diseases of the digestive system                                                                 | 16.4           | 25.3                              | 15.2                        | 16.8                        |
| Diseases of the skin and subcutaneous tissue                                                     | 3.0            | 2.6                               | 2.1                         | 1.9                         |
| Diseases of the musculo-skeletal system and connective tissue                                    | 10.9           | 15.4                              | 17.9                        | 17.3                        |
| Diseases of the genito-urinary system                                                            | 10.9           | 10.0                              | 10.5                        | 13.5                        |
| Pregnancy, childbirth and the puerperium                                                         | 16.3           | 19.8                              | 15.2                        | 16.2                        |
| Certain conditions originating in the perinatal period                                           | 1.9            | 2.6                               | 3.6                         | 2.3                         |
| Congenital malformations, deformations and chromosomal abnormalities                             | 1.8            | 1.9                               | 2.0                         | 0.8                         |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified          | 15.4           | 11.5                              | 11.9                        | 19.4                        |
| Injury, poisoning and certain other consequences of external causes                              | 19.5           | 18.4                              | 17.1                        | 18.3                        |
| Factors influencing health status and contact with health services                               | 21.0           | 19.7                              | 3.5                         | 4.6                         |
| <b>Total</b>                                                                                     | <b>202.0</b>   | <b>216.9</b>                      | <b>210.6</b>                | <b>215.8</b>                |

\* Comprises somatic departments in ordinary hospitals and in specialized somatic hospitals

1 Average 2000-2004.

2 Excluding departments in psychiatric hospitals and in non-specialized departments in health centres.

3 Discharges with a length of stay less than 90 days.

4 Figures are for discharges from hospitals, not for finished treatment in departments.

Sources: The national in-patient registers

ICD-10 chapters.

**Udskrivninger fra sygehuse\* efter hoveddiagnosegrupper, Tabel 3.4.1  
pr. 1 000 indbyggere 2004**

| <i>Iceland<sup>3)</sup></i> | <i>Norway<sup>4)</sup></i> | <i>Sweden</i> |                                                                                           |
|-----------------------------|----------------------------|---------------|-------------------------------------------------------------------------------------------|
| 2.2                         | 4.3                        | 4.3           | Visse infektions- og parasitære sygdomme                                                  |
| 14.7                        | 18.2                       | 15.2          | Svulster                                                                                  |
| 1.6                         | 1.2                        | 1.2           | Sygdomme i blod og bloddannende organer og visse lidelser i forbindelse med immunsystemet |
| 2.1                         | 2.8                        | 3.1           | Endokrine, ernærings- og stofskiftesygdomme                                               |
| 1.9                         | 2.1                        | 1.7           | Psyriske og adfærdsmæssige lidelser                                                       |
| 5.0                         | 8.0                        | 4.2           | Sygdomme i nervesystem                                                                    |
| 1.6                         | 2.1                        | 1.0           | Sygdomme i øje og øjenomgivelser                                                          |
| 1.3                         | 0.9                        | 0.9           | Sygdomme i øre og processus mastoideus                                                    |
| 17.0                        | 24.8                       | 25.7          | Sygdomme i kredsløbsorganer                                                               |
| 10.5                        | 14.1                       | 9.6           | Sygdomme i åndedrætsorganer                                                               |
| 13.5                        | 12.4                       | 12.3          | Sygdomme i fordøjelsesorganer                                                             |
| 2.9                         | 1.9                        | 1.1           | Sygdomme i hud og underhud                                                                |
| 10.7                        | 12.4                       | 8.4           | Sygdomme i knogler, bevægelsessystem og bindevæv                                          |
| 11.0                        | 9.5                        | 7.3           | Sygdomme i urin- og kønsorganer                                                           |
| 20.9                        | 14.9                       | 13.9          | Svangerskab, fødsel og barsel                                                             |
| 3.9                         | 2.6                        | 1.6           | Visse årsager til sygdomme i perinatalperioden                                            |
| 1.8                         | 1.8                        | 1.2           | Medfødte misdannelser og kromosomanomalier                                                |
| 6.4                         | 11.0                       | 14.5          | Symptomer og abnorme fund ikke klassificeret andetsteds                                   |
| 10.7                        | 18.6                       | 15.6          | Læsioner, forgiftninger og visse andre følger af ydre påvirkninger                        |
| 22.7                        | 9.6                        | 6.1           | Faktorer af betydning for sundhedstilstand og kontakter med sundhedsvæsen                 |
| 162.3                       | 173.5                      | 148.9         | I alt                                                                                     |

\* Omfatter somatiske afdelinger ved almindelige sygehuse og ved somatiske specialsygehuse

1 Gennemsnit for årene 2000-2004.

2 Eksklusiv psykiatriske hospitalsafdelinger og ikke-specialiserede afdelinger på sundhedscentraler.

3 Udskrivninger med liggetid under 90 dage.

4 Opgørelsen vedrører udskrivninger fra sygehuse, ikke afsluttede behandlinger ved afdelinger.

Kilder: Landspatientregistrene

ICD-10 kapitler.

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**

**Table 3.4.2 Average length of stay in hospitals\* by main diagnostic group 2004**

|                                                                                                  | <i>Denmark</i> | <i>Faroe Islands<sup>1)</sup></i> | <i>Finland<sup>2)</sup></i> | <i>Åland<sup>1)2)</sup></i> |
|--------------------------------------------------------------------------------------------------|----------------|-----------------------------------|-----------------------------|-----------------------------|
| Certain infectious and parasitic diseases                                                        | 5.1            | 6.1                               | 5.9                         | 5.3                         |
| Neoplasms                                                                                        | 5.6            | 4.4                               | 4.2                         | 7.5                         |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune system | 4.0            | 2.8                               | 4.0                         | 6.7                         |
| Endocrine, nutritional and metabolic diseases                                                    | 5.7            | 7.3                               | 4.9                         | 6.0                         |
| Mental and behavioural disorders                                                                 | 4.2            | 35.9                              | 27.8                        | 6.5                         |
| Diseases of the nervous system                                                                   | 5.1            | 4.7                               | 4.1                         | 4.0                         |
| Diseases of the eye and adnexa                                                                   | 2.5            | 1.9                               | 1.3                         | 1.5                         |
| Diseases of the ear and mastoid process                                                          | 2.5            | 0.8                               | 1.6                         | 1.7                         |
| Diseases of the circulatory system                                                               | 5.5            | 9.8                               | 5.3                         | 6.7                         |
| Diseases of the respiratory system                                                               | 4.8            | 4.9                               | 4.3                         | 4.6                         |
| Diseases of the digestive system                                                                 | 4.6            | 2.7                               | 3.7                         | 5.1                         |
| Diseases of the skin and subcutaneous tissue                                                     | 5.0            | 5.4                               | 4.8                         | 5.0                         |
| Diseases of the musculo-skeletal system and connective tissue                                    | 5.3            | 6.3                               | 3.7                         | 5.0                         |
| Diseases of the genito-urinary system                                                            | 3.6            | 3.2                               | 3.0                         | 3.8                         |
| Pregnancy, childbirth and the puerperium                                                         | 3.0            | 4.5                               | 3.4                         | 3.5                         |
| Certain conditions originating in the perinatal period                                           | 10.4           | 5.6                               | 6.2                         | 11.2                        |
| Congenital malformations, deformations and chromosomal abnormalities                             | 4.0            | 5.6                               | 4.1                         | 19.5                        |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified          | 3.1            | 3.5                               | 2.8                         | 2.1                         |
| Injury, poisoning and certain other consequences of external causes                              | 4.6            | 5.4                               | 4.5                         | 4.8                         |
| Factors influencing health status and contact with health services                               | 5.1            | 4.1                               | 2.8                         | 3.8                         |
| <b>Total</b>                                                                                     | <b>4.7</b>     | <b>6.3</b>                        | <b>4.8</b>                  | <b>4.8</b>                  |

\* Comprises somatic departments in ordinary hospitals and in specialized somatic hospitals

1 Average 2000–2004.

2 Excluding departments in psychiatric hospitals and in non-specialized departments in health centres.

3 Excluding patients staying 90 days or longer.

Sources: See Table 3.4.1

Gennemsnitlig liggetid ved sygehuse\* efter hoveddiagnosegrupper 2004 Tabel 3.4.2

| <i>Iceland<sup>3)</sup></i> | <i>Norway</i> | <i>Sweden</i> |                                                                                           |
|-----------------------------|---------------|---------------|-------------------------------------------------------------------------------------------|
| 5.2                         | 6.8           | 5.6           | Visse infektions- og parasitære sygdomme                                                  |
| 7.0                         | 7.3           | 7.5           | Svulster                                                                                  |
| 3.5                         | 4.5           | 4.9           | Sygdomme i blod og bloddannende organer og visse lidelser i forbindelse med immunsystemet |
| 7.3                         | 4.7           | 6.0           | Endokrine, ernærings- og stofskiftesygdomme                                               |
| 16.0                        | 3.9           | 5.2           | Psyriske og adfærdsmæssige lidelser                                                       |
| 6.2                         | 3.5           | 5.5           | Sygdomme i nervesystem                                                                    |
| 2.6                         | 2.8           | 2.8           | Sygdomme i øje og øjenomgivelser                                                          |
| 1.9                         | 2.5           | 2.2           | Sygdomme i øre og processus mastoideus                                                    |
| 6.7                         | 5.5           | 5.9           | Sygdomme i kredsløbsorganer                                                               |
| 5.9                         | 6.2           | 5.2           | Sygdomme i åndedrætsorganer                                                               |
| 3.9                         | 4.9           | 4.7           | Sygdomme i fordøjelsesorganer                                                             |
| 6.4                         | 6.1           | 6.8           | Sygdomme i hud og underhud                                                                |
| 6.2                         | 5.1           | 6.1           | Sygdomme i knogler, bevægelsessystem og bindevæv                                          |
| 3.4                         | 4.4           | 4.2           | Sygdomme i urin- og kønsorganer                                                           |
| 2.5                         | 3.8           | 2.8           | Svangerskab, fødsel og barsel                                                             |
| 4.7                         | 9.3           | 10.9          | Visse årsager til sygdomme i perinatalperioden                                            |
| 4.1                         | 4.7           | 4.8           | Medfødte misdannelser og kromosomanomalier                                                |
| 4.2                         | 2.3           | 2.5           | Symptomer og abnorme fund ikke klassificeret andetsteds                                   |
| 5.6                         | 4.9           | 5.2           | Læsioner, forgiftninger og visse andre følger af ydre påvirkninger                        |
| 4.2                         | 6.9           | 5.2           | Faktorer af betydning for sundhedstilstand og kontakter med sundhedsvæsen                 |
| 5.0                         | 5.2           | 5.1           | I alt                                                                                     |

\* Omfatter somatiske afdelinger ved almindelige sygehuse og ved somatiske specialsygehuse

1 Gennemsnit for årene 2000-2004.

2 Eksklusiv psykiatiske hospitalsafdelinger og ikke-specialiserede afdelinger på sundhedscentraler.

3 Eksklusive patienter med liggetid på 90 dage eller mere.

Kilder: Se tabel 3.4.1

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.4.3 Patients treated in hospitals\* during 2004 by main diagnostic group, per 1 000 inhabitants**

|                                                                                                  | <i>Denmark</i> | <i>Faroe Islands<sup>1)</sup></i> | <i>Finland<sup>2)</sup></i> | <i>Åland<sup>1)2)</sup></i> |
|--------------------------------------------------------------------------------------------------|----------------|-----------------------------------|-----------------------------|-----------------------------|
| Certain infectious and parasitic diseases                                                        | 4.4            | 4.2                               | 3.8                         | 5.6                         |
| Neoplasms                                                                                        | 9.2            | 8.0                               | 10.4                        | 8.2                         |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune system | 1.9            | 1.7                               | 0.9                         | 0.8                         |
| Endocrine, nutritional and metabolic diseases                                                    | 3.7            | 3.7                               | 2.1                         | 2.3                         |
| Mental and behavioural disorders                                                                 | 2.2            | 6.6                               | 5.2                         | 2.0                         |
| Diseases of the nervous system                                                                   | 3.4            | 4.2                               | 5.8                         | 7.5                         |
| Diseases of the eye and adnexa                                                                   | 2.1            | 6.0                               | 10.7                        | 3.9                         |
| Diseases of the ear and mastoid process                                                          | 0.8            | 3.0                               | 2.5                         | 2.4                         |
| Diseases of the circulatory system                                                               | 15.9           | 18.6                              | 19.6                        | 19.7                        |
| Diseases of the respiratory system                                                               | 11.8           | 11.9                              | 11.2                        | 15.3                        |
| Diseases of the digestive system                                                                 | 12.2           | 21.8                              | 12.9                        | 14.0                        |
| Diseases of the skin and subcutaneous tissue                                                     | 2.4            | 2.2                               | 1.7                         | 1.7                         |
| Diseases of the musculo-skeletal system and connective tissue                                    | 8.9            | 13.2                              | 15.0                        | 14.1                        |
| Diseases of the genito-urinary system                                                            | 8.6            | 8.4                               | 9.2                         | 11.8                        |
| Pregnancy, childbirth and the puerperium                                                         | 14.3           | 19.2                              | 14.5                        | 14.6                        |
| Certain conditions originating in the perinatal period                                           | 1.6            | 2.0                               | 2.8                         | 1.9                         |
| Congenital malformations, deformations and chromosomal abnormalities                             | 1.2            | 1.4                               | 1.4                         | 0.5                         |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified          | 13.1           | 10.1                              | 10.4                        | 13.1                        |
| Injury, poisoning and certain other consequences of external causes                              | 16.0           | 15.6                              | 14.6                        | 16.2                        |
| Factors influencing health status and contact with health services                               | 17.4           | 17.8                              | 3.1                         | 4.3                         |
| <b>Total</b>                                                                                     | <b>116.5</b>   | <b>175.3</b>                      | <b>168.7</b>                | <b>173.1</b>                |

\* Comprises somatic departments in ordinary hospitals and in specialized somatic hospitals

1 Average 2000-2004.

2 Excluding departments in psychiatric hospitals and in non-specialized departments in health centres.

3 Excluding patients staying 90 days or longer.

4 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

Sources: See Table 3.4.1

**Patienter behandlet ved sygehuse\* i løbet af 2004, efter Tabel 3.4.3  
hoveddiagnosegrupper, pr. 1 000 indbyggere**

| <i>Iceland<sup>3)</sup></i> | <i>Norway<sup>4)</sup></i> | <i>Sweden</i> |                                                                                           |
|-----------------------------|----------------------------|---------------|-------------------------------------------------------------------------------------------|
| 2.1                         | 4.1                        | 3.7           | Visse infektions- og parasitære sygdomme                                                  |
| 8.5                         | 11.9                       | 8.5           | Svulster                                                                                  |
| 1.0                         | 1.0                        | 1.0           | Sygdomme i blod og bloddannende organer og visse lidelser i forbindelse med immunsystemet |
| 1.8                         | 2.5                        | 2.5           | Endokrine, ernærings- og stofskiftesygdomme                                               |
| 1.6                         | 1.9                        | 1.5           | Psyriske og adfærdsmæssige lidelser                                                       |
| 3.4                         | 6.4                        | 3.3           | Sygdomme i nervesystem                                                                    |
| 1.4                         | 1.6                        | 0.8           | Sygdomme i øje og øjenomgivelser                                                          |
| 1.2                         | 0.8                        | 0.9           | Sygdomme i øre og processus mastoideus                                                    |
| 14.2                        | 21.5                       | 16.9          | Sygdomme i kredsløbsorganer                                                               |
| 9.1                         | 12.5                       | 7.3           | Sygdomme i åndedrætsorganer                                                               |
| 11.9                        | 10.9                       | 9.8           | Sygdomme i fordøjelsesorganer                                                             |
| 2.5                         | 1.7                        | 1.0           | Sygdomme i hud og underhud                                                                |
| 9.1                         | 11.0                       | 7.1           | Sygdomme i knogler, bevægelsessystem og bindevæv                                          |
| 10.0                        | 8.5                        | 6.2           | Sygdomme i urin- og kønsorganer                                                           |
| 20.0                        | 14.6                       | 11.8          | Svangerskab, fødsel og barsel                                                             |
| 3.1                         | 2.5                        | 0.8           | Visse årsager til sygdomme i perinatalperioden                                            |
| 1.4                         | 1.5                        | 0.8           | Medfødte misdannelser og kromosomanomalier                                                |
| 5.9                         | 10.4                       | 12.5          | Symptomer og abnorme fund ikke klassificeret andetsteds                                   |
| 9.5                         | 17.4                       | 13.0          | Læsioner, forgiftninger og visse andre følger af ydre påvirkninger                        |
| 19.6                        | 7.9                        | 5.0           | Faktorer af betydning for sundhedstilstand og kontakter med sundhedsvæsen                 |
| 137.2                       | 125.0                      | 93.8          | I alt                                                                                     |

\* Omfatter somatiske afdelinger ved almindelige sygehuse og ved somatiske specialsygehuse

1 Gennemsnit for årene 2000-2004.

2 Eksklusiv psykiatriske hospitalsafdelinger og ikke-specialiserede afdelinger på sundhedscentraler.

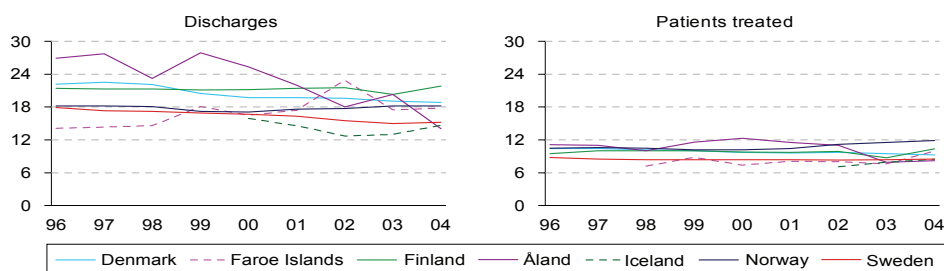
3 Eksklusive patienter med liggetid på 90 dage eller mere.

4 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

Kilder: Se tabel 3.4.1

**Figure 3.4.3 Discharges from hospitals and patients treated during the year for neoplasms, per 1 000 inhabitants 1999–2004**

Udskrivninger og patienter behandlet i løbet af året for ondartede svulster, pr. 1 000 indbyggere 1999–2004



Sources: See Tables 3.4.1 and 3.4.3

Kilder: Se tabel 3.4.1 og 3.4.3

**Table 3.4.4 Discharges, patients treated and average length of stay in hospital\* for malignant neoplasm of breast, women 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\*  
for kræft i bryst, kvinder 2004

|                                                            |                                   | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|-----------------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges, total</i>                                   | <i>Udskrivninger, i alt</i>       | 8 131   | 147                         | 11 405  | 30                  | 332     | 6 187                | 11 085 |
| <i>Patients treated, total</i>                             | <i>Patienter behandlet, i alt</i> | 5 201   | 37                          | 5 978   | 19                  | 229     | 4 286                | 8 462  |
| <i>Patients treated per 100 000 women in the age group</i> |                                   |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                                   |         |                             |         |                     |         |                      |        |
|                                                            | 25-44                             | 65      | 948                         | 90      | 57                  | 84      | 66                   | 69     |
|                                                            | 45-64                             | 359     | 354                         | 461     | 268                 | 365     | 386                  | 354    |
|                                                            | 65+                               | 460     | 462                         | 403     | 278                 | 410     | 433                  | 401    |
|                                                            | <i>Total rate</i>                 |         |                             |         |                     |         |                      |        |
|                                                            | Samlet rate                       | 191     | 161                         | 224     | 142                 | 157     | 185                  | 187    |
| <i>Average length of stay per patient treated</i>          |                                   |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                                   |         |                             |         |                     |         |                      |        |
|                                                            |                                   | 7.3     | 15.4                        | 5.9     | 10.1                | 8.0     | 8.2                  | 6.4    |
| <i>Average length of stay per discharge</i>                |                                   |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                                   |         |                             |         |                     |         |                      |        |
|                                                            |                                   | 4.7     | 3.8                         | 3.1     | 6.4                 | 5.5     | 5.7                  | 4.9    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: C50.  
Tabellen omfatter ICD-10: C50.

Source: \* Definition, see table 3.4.1  
Kilde: \* Definition, se tabel 3.4.1

**Table 3.4.5 Discharges, patients treated and average length of stay in hospital\* for malignant neoplasm of trachea, bronchus and lung 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\* for kræft i tracheae, bronkie og lunge 2004

|                                                            |                            | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|----------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges</i>                                          | <i>Udskrivninger</i>       |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 5 124   | 48                          | 4 788   | 14                  | 193     | 3 759                | 4 355  |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 4 716   | 34                          | 1 790   | 6                   | 188     | 2 622                | 3 745  |
| <i>Patients treated</i>                                    | <i>Patienter behandlet</i> |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 2 306   | 12                          | 1 863   | 7                   | 98      | 2 187                | 2 346  |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 1 948   | 7                           | 664     | 3                   | 107     | 1 511                | 2 039  |
| <i>Patients treated per 100 000 men in the age group</i>   |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 mænd i alderen</i>      |                            |         |                             |         |                     |         |                      |        |
| 0-24                                                       |                            | -       | -                           | -       | -                   | -       | -                    | -      |
| 25-44                                                      |                            | 4       | -                           | 4       | -                   | 5       | 4                    | 3      |
| 45-64                                                      |                            | 113     | 73                          | 90      | 81                  | 112     | 121                  | 60     |
| 65+                                                        |                            | 422     | 261                         | 363     | 225                 | 380     | 518                  | 239    |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 86      | 47                          | 73      | 54                  | 67      | 96                   | 53     |
| <i>Patients treated per 100 000 women in the age group</i> |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                            |         |                             |         |                     |         |                      |        |
| 0-24                                                       |                            | 1       | -                           | 1       | -                   | -       | -                    | -      |
| 25-44                                                      |                            | 7       | 3                           | 3       | -                   | 2       | 6                    | 3      |
| 45-64                                                      |                            | 111     | 48                          | 33      | 27                  | 137     | 99                   | 70     |
| 65+                                                        |                            | 238     | 133                         | 81      | 79                  | 330     | 233                  | 134    |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 71      | 32                          | 25      | 22                  | 73      | 65                   | 45     |
| <i>Average length of stay per patient treated</i>          |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 15.1    | 14.4                        | 13.4    | 20.6                | 18.0    | 16.4                 | 19.6   |
| <i>Average length of stay per discharge</i>                |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 6.5     | 3.3                         | 5.2     | 10.3                | 9.7     | 9.5                  | 10.6   |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

Source: See tabel 3.4.1-3.

Kilde: Se tabel 3.4.1-3.

\* Definition: see tabel 3.4.1.

\* Definition: se tabel 3.4.1.

**Table 3.4.6 Discharges, patients treated and average length of stay in hospital\* for acute myocardial infarction 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\* for akut hjerteinfarkt 2004

|                                                            |                            | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|----------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges</i>                                          | <i>Udskrivninger</i>       |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 10 793  | 63                          | 7 980   | 51                  | 351     | 11 459               | 21 117 |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 5 854   | 37                          | 5 516   | 37                  | 137     | 6 434                | 13 590 |
| <i>Patients treated</i>                                    | <i>Patienter behandlet</i> |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 6 747   | 53                          | 6 187   | 39                  | 309     | 10 123               | 15 247 |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 3 958   | 30                          | 4 468   | 28                  | 120     | 5 791                | 10 374 |
| <i>Patients treated per 100 000 men in the age group</i>   |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 mænd i alderen</i>      |                            |         |                             |         |                     |         |                      |        |
| 0-44                                                       |                            | 20      | 21                          | 13      | 13                  | 15      | 40                   | 12     |
| 45-64                                                      |                            | 341     | 314                         | 278     | 322                 | 380     | 662                  | 348    |
| 65+                                                        |                            | 1 153   | 1 129                       | 1 218   | 1 463               | 1 083   | 2 051                | 1 623  |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 253     | 219                         | 242     | 299                 | 211     | 445                  | 342    |
| <i>Patients treated per 100 000 women in the age group</i> |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                            |         |                             |         |                     |         |                      |        |
| 0-44                                                       |                            | 6       | 1                           | 2       | -                   | 3       | 7                    | 3      |
| 45-64                                                      |                            | 100     | 91                          | 76      | 80                  | 72      | 167                  | 109    |
| 65+                                                        |                            | 677     | 722                         | 782     | 994                 | 500     | 1 217                | 1 024  |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 145     | 131                         | 167     | 209                 | 82      | 250                  | 229    |
| <i>Average length of stay per patient treated</i>          |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 7.6     | 10.1                        | 7.6     | 9.0                 | 8.3     | 6.0                  | 7.5    |
| <i>Average length of stay per discharge</i>                |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 4.9     | 8.5                         | 6.0     | 6.9                 | 7.3     | 5.4                  | 5.5    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: I21-I22.  
Tabellen omfatter ICD-10: I21-I22.

Source: \* Definition, see table 3.4.1  
Kilde: \* Definition, se tabel 3.4.1

**Table 3.4.7 Discharges, patients treated and average length of stay in hospital\* for cerebrovascular diseases 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\* for karsygdomme i hjernen 2004

|                                                            |                            | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|----------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges</i>                                          | <i>Udskrivninger</i>       |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 11 128  | 96                          | 10 263  | 47                  | 347     | 7 911                | 20 613 |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 10 666  | 68                          | 9 217   | 39                  | 253     | 7 914                | 19 783 |
| <i>Patients treated</i>                                    | <i>Patienter behandlet</i> |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 8 423   | 74                          | 7 568   | 34                  | 285     | 7 297                | 15 772 |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 8 056   | 60                          | 7 050   | 27                  | 220     | 7 244                | 15 633 |
| <i>Patients treated per 100 000 men in the age group</i>   |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 mænd i alderen</i>      |                            |         |                             |         |                     |         |                      |        |
| 0-44                                                       |                            | 24      | 18                          | 29      | 40                  | 13      | 30                   | 18     |
| 45-64                                                      |                            | 353     | 266                         | 372     | 242                 | 211     | 319                  | 291    |
| 65-79                                                      |                            | 1 319   | 1 625                       | 1 208   | 1 045               | 1 057   | 1 366                | 1 359  |
| 80+                                                        |                            | 2 614   | 2 228                       | 1 558   | 1 345               | 1 578   | 1 910                | 1 931  |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 315     | 302                         | 296     | 261                 | 194     | 321                  | 354    |
| <i>Patients treated per 100 000 women in the age group</i> |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                            |         |                             |         |                     |         |                      |        |
| 0-44                                                       |                            | 27      | 7                           | 26      | -                   | 15      | 29                   | 16     |
| 45-64                                                      |                            | 223     | 187                         | 214     | 80                  | 103     | 214                  | 181    |
| 65-79                                                      |                            | 915     | 951                         | 794     | 496                 | 753     | 924                  | 915    |
| 80+                                                        |                            | 2 148   | 1 576                       | 1 114   | 756                 | 1 070   | 1 421                | 1 466  |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 295     | 265                         | 264     | 201                 | 151     | 313                  | 345    |
| <i>Average length of stay per patient treated</i>          |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 13.7    | 39.1                        | 12.7    | 18.7                | 15.1    | 11.1                 | 15.0   |
| <i>Average length of stay per discharge</i>                |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 10.4    | 32.0                        | 9.5     | 13.3                | 12.7    | 10.2                 | 11.7   |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: I60-I69.

Tabellen omfatter ICD-10: I60-I69.

Source: See table 3.4.1. \* Definition, see table 3.4.1

Kilde: se tabel 3.4.1 \* Definition, se tabel 3.4.1

**Table 3.4.8 Discharges, patients treated and average length of stay in hospital\* for chronic obstructive pulmonary disease and bronchiectasis 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\* for bronkit, emfysem og anden obstruktiv lungesygdom 2004

|                                                     |                                   | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|-----------------------------------------------------|-----------------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges, total</i>                            | <i>Udskrivninger, i alt</i>       | 19 097  | 83                          | 7 147   | 57                  | 446     | 9 193                | 17 116 |
| <i>Patients treated, total</i>                      | <i>Patienter behandlet, i alt</i> | 11 400  | 60                          | 4 453   | 33                  | 321     | 6 689                | 10 268 |
| <i>Per 100 000 in the age group</i>                 |                                   |         |                             |         |                     |         |                      |        |
| <i>Pr. 100 000 i alderen</i>                        |                                   |         |                             |         |                     |         |                      |        |
| 0-4                                                 |                                   | 43      | 277                         | 6       | -                   | -       | 16                   | 4      |
| 5-14                                                |                                   | 2       | 3                           | 1       | -                   | -       | 5                    | 1      |
| 15-24                                               |                                   | 3       | 3                           | 1       | -                   | 9       | 3                    | 1      |
| 25-64                                               |                                   | 91      | 67                          | 41      | 42                  | 45      | 77                   | 39     |
| 65-74                                               |                                   | 866     | 479                         | 330     | 418                 | 525     | 596                  | 410    |
| 75+                                                 |                                   | 1 258   | 618                         | 477     | 806                 | 962     | 786                  | 663    |
| <i>Total rate</i>                                   |                                   |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                  |                                   | 211     | 127                         | 85      | 125                 | 110     | 146                  | 114    |
| <i>Average length of stay per patient treated</i>   |                                   |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i> |                                   |         |                             |         |                     |         |                      |        |
|                                                     |                                   | 9.7     | 12.3                        | 9.8     | 13.2                | 14.7    | 11.1                 | 10.4   |
| <i>Average length of stay per discharge</i>         |                                   |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>       |                                   |         |                             |         |                     |         |                      |        |
|                                                     |                                   | 5.8     | 8.9                         | 6.1     | 7.6                 | 10.6    | 8.1                  | 6.2    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: J40-J44, J47.  
Tabellen omfatter ICD-10: J40-J44, J47.

Source: see table 3.4.1. \* Definition, see table 3.4.1.  
Kilde: se tabel 3.4.1. \* Definition, se tabel 3.4.1

**Table 3.4.9 Discharges, patients treated and average length of stay in hospital\* for asthma 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\* for astma 2004

|                                                     |                                   | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|-----------------------------------------------------|-----------------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges, total</i>                            | <i>Udskrivninger, i alt</i>       | 8 735   | 120                         | 6 216   | 52                  | 120     | 3 864                | 5 397  |
| <i>Patients treated, total</i>                      | <i>Patienter behandlet, i alt</i> | 6 639   | 89                          | 4 831   | 39                  | 107     | 3 384                | 4 452  |
| <i>Per 100 000 in the age group</i>                 |                                   |         |                             |         |                     |         |                      |        |
| <i>Pr. 100 000 i alderen</i>                        |                                   |         |                             |         |                     |         |                      |        |
| 0-4                                                 |                                   | 1 019   | 1 335                       | 328     | 878                 | 186     | 494                  | 420    |
| 5-14                                                |                                   | 171     | 262                         | 57      | 239                 | 18      | 90                   | 30     |
| 15-24                                               |                                   | 50      | 51                          | 35      | 34                  | 12      | 27                   | 14     |
| 25-64                                               |                                   | 49      | 44                          | 60      | 49                  | 20      | 37                   | 18     |
| 65-74                                               |                                   | 45      | 146                         | 152     | 186                 | 49      | 47                   | 42     |
| 75+                                                 |                                   | 46      | 140                         | 250     | 313                 | 100     | 52                   | 98     |
| <i>Total rate</i>                                   |                                   |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                  |                                   | 123     | 188                         | 92      | 148                 | 37      | 74                   | 50     |
| <i>Average length of stay per patient treated</i>   |                                   |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i> |                                   |         |                             |         |                     |         |                      |        |
|                                                     |                                   | 2.9     | 3.8                         | 5.7     | 4.8                 | 5.6     | 5.2                  | 0.1    |
| <i>Average length of stay per discharge</i>         |                                   |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>       |                                   |         |                             |         |                     |         |                      |        |
|                                                     |                                   | 2.2     | 2.8                         | 4.4     | 3.6                 | 5.0     | 4.5                  | 2.7    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: J45-J46.  
Tabellen omfatter ICD-10: J45-J46.

Source: see table 3.4.1. \* Definition, see table 3.4.1.  
Kilde: se tabel 3.4.1. \* Definition, se tabel 3.19

**Table 3.4.10 Discharges, patients treated and average length of stay in hospital\* for intervertebral disc disorders 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\*  
for diskusprolaps i halsens ryghvirvler og andre ryghvirvler 2004

|                                                                                                   | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|---------------------------------------------------------------------------------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges, total</i><br>Udskrivninger, i alt                                                  | 6 587   | 50                          | 6 542   | 30                  | 460     | 6 243                | 3 754  |
| <i>Patients treated, total</i><br>Patienter behandlet, i alt                                      | 4 874   | 39                          | 5 458   | 21                  | 420     | 5 618                | 3 182  |
| <i>Per 100 000 in the age group</i><br>Pr. 100 000 i alderen                                      |         |                             |         |                     |         |                      |        |
| 0-24                                                                                              | 6       | 7                           | 15      | -                   | 17      | 11                   | 3      |
| 25-44                                                                                             | 130     | 117                         | 158     | 144                 | 234     | 196                  | 62     |
| 45-64                                                                                             | 148     | 138                         | 178     | 121                 | 250     | 207                  | 53     |
| 65+                                                                                               | 80      | 124                         | 56      | 46                  | 122     | 78                   | 22     |
| <i>Total rate</i><br>Samlet rate                                                                  | 90      | 82                          | 104     | 79                  | 144     | 122                  | 35     |
| <i>Average length of stay per patient treated</i><br>Gennemsnitlig liggetid pr. behandlet patient |         |                             |         |                     |         |                      |        |
|                                                                                                   | 7.1     | 9.1                         | 5.2     | 8.5                 | 2.3     | 5.0                  | 6.3    |
| <i>Average length of stay per discharge</i><br>Gennemsnitlig liggetid pr. udskrivning             |         |                             |         |                     |         |                      |        |
|                                                                                                   | 5.3     | 6.9                         | 4.3     | 5.9                 | 2.1     | 4.5                  | 5.3    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: M50-M51.  
Tabellen omfatter ICD-10: M50-M51.

Source: See table 3.4.1. \* Definition, see table 3.4.1  
Kilde: se tabel 3.4.1. \* Definition, se tabel 3.4.1

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**
**Table 3.4.11 Discharges, patients treated and average length of stay in hospital\* for fracture of femur 2004**

 Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\*  
for brud af lår 2004

|                                                            |                            | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|----------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges</i>                                          | <i>Udskrivninger</i>       |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 3 807   | 33                          | 2 956   | 12                  | 156     | 3 520                | 7 520  |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 8 491   | 71                          | 5 692   | 40                  | 314     | 8 290                | 16 091 |
| <i>Patients treated</i>                                    | <i>Patienter behandlet</i> |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 3 294   | 25                          | 2 474   | 9                   | 132     | 3 292                | 6 331  |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 7 453   | 52                          | 4 858   | 36                  | 247     | 7 734                | 13 710 |
| <i>Patients treated per 100 000 men in the age group</i>   |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 mænd i alderen</i>      |                            |         |                             |         |                     |         |                      |        |
|                                                            | 0-44                       | 25      | 26                          | 33      | -                   | 18      | 35                   | 23     |
|                                                            | 45-64                      | 83      | 70                          | 74      | -                   | 75      | 75                   | 61     |
|                                                            | 65-74                      | 269     | 364                         | 220     | 191                 | 171     | 290                  | 248    |
|                                                            | 75-79                      | 684     | 387                         | 474     | 513                 | 837     | 753                  | 647    |
|                                                            | 80+                        | 1 740   | 1 356                       | 1 192   | 1 466               | 1 346   | 2 121                | 1 870  |
|                                                            | <i>Total rate</i>          |         |                             |         |                     |         |                      |        |
|                                                            | <i>Samlet rate</i>         | 123     | 102                         | 97      | 69                  | 90      | 145                  | 142    |
| <i>Patients treated per 100 000 women in the age group</i> |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                            |         |                             |         |                     |         |                      |        |
|                                                            | 0-44                       | 9       | 18                          | 13      | -                   | 11      | 12                   | 8      |
|                                                            | 45-64                      | 82      | 80                          | 54      | 54                  | 56      | 101                  | 66     |
|                                                            | 65-74                      | 472     | 497                         | 269     | 361                 | 389     | 506                  | 402    |
|                                                            | 75-79                      | 1 238   | 1 304                       | 735     | 991                 | 817     | 1 292                | 1 087  |
|                                                            | 80+                        | 3 101   | 2 617                       | 1 975   | 2 767               | 2 795   | 3 646                | 3 004  |
|                                                            | <i>Total rate</i>          |         |                             |         |                     |         |                      |        |
|                                                            | <i>Samlet rate</i>         | 273     | 229                         | 182     | 269                 | 169     | 334                  | 302    |
| <i>Average length of stay per patient treated</i>          |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 11.8    | 20.4                        | 7.8     | 17.4                | 15.9    | 10.4                 | 12.5   |
| <i>Average length of stay per discharge</i>                |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 10.3    | 15.1                        | 6.6     | 15.0                | 12.9    | 9.7                  | 10.6   |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: S72.

Tabellen omfatter ICD-10: S72.

Source: See table 3.4.1 \* Definition, see Table 3.4.1

Kilde: Se tabel 3.4.1 \* Definition, se tabel 3.4.1

**Table 3.4.12 Discharges, patients treated and average length of stay in hospital\* for alcoholic liver disease 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\*  
for alkoholisk leversygdom 2004

|                                                            |                            | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|----------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges</i>                                          | <i>Udskrivninger</i>       |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 1 378   | 3                           | 1 349   | 3                   | 8       | 585                  | 1 401  |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 666     | 1                           | 444     | 1                   | 1       | 241                  | 525    |
| <i>Patients treated</i>                                    | <i>Patienter behandlet</i> |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 872     | 2                           | 880     | 1                   | 7       | 378                  | 813    |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 448     | 1                           | 305     | -                   | 1       | 175                  | 337    |
| <i>Patients treated per 100 000 men in the age group</i>   |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 mænd i alderen</i>      |                            |         |                             |         |                     |         |                      |        |
| 0-44                                                       |                            | 7       | -                           | 8       | -                   | -       | 3                    | 2      |
| 45-64                                                      |                            | 83      | 21                          | 88      | 27                  | 15      | 45                   | 47     |
| 65+                                                        |                            | 46      | 35                          | 37      | -                   | 13      | 31                   | 29     |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 33      | 9                           | 34      | 8                   | 5       | 17                   | 18     |
| <i>Patients treated per 100 000 women in the age group</i> |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                            |         |                             |         |                     |         |                      |        |
| 0-44                                                       |                            | 4       | -                           | 4       | -                   | 1       | 2                    | 1      |
| 45-64                                                      |                            | 43      | 4                           | 29      | -                   | -       | 19                   | 19     |
| 65+                                                        |                            | 18      | 12                          | 8       | -                   | -       | 12                   | 10     |
| <i>Total rate</i>                                          |                            |         |                             |         |                     |         |                      |        |
| <i>Samlet rate</i>                                         |                            | 16      | 3                           | 11      | -                   | 1       | 8                    | 7      |
| <i>Average length of stay per patient treated</i>          |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 13.6    | 11.9                        | 10.9    | 109.0               | 14.0    | 13.0                 | 13.1   |
| <i>Average length of stay per discharge</i>                |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 8.8     | 8.4                         | 7.2     | 27.3                | 12.4    | 8.7                  | 7.8    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: K70.  
Tabellen omfatter ICD-10: K70.

Source: See table 3.4.1. \* Definition, see table 3.4.1  
Kilde: Se tabel 3.4.1. \* Definition, se tabel 3.4.1

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**

**Table 3.4.13 Discharges, patients treated and average length of stay in hospital\* for other diseases of liver 2004**

Udskrivninger, patienter behandlet og gennemsnitlig liggetid ved sygehuse\* for ikke-alkoholisk leversygdom 2004

|                                                            |                            | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway <sup>2)</sup> | Sweden |
|------------------------------------------------------------|----------------------------|---------|-----------------------------|---------|---------------------|---------|----------------------|--------|
| <i>Discharges</i>                                          | <i>Udskrivninger</i>       |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 1 028   | 6                           | 894     | 1                   | 24      | 603                  | 1 268  |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 1 098   | 13                          | 1 191   | 1                   | 40      | 713                  | 1 348  |
| <i>Patients treated</i>                                    | <i>Patienter behandlet</i> |         |                             |         |                     |         |                      |        |
| <i>Men, total</i>                                          | <i>Mænd, i alt</i>         | 740     | 5                           | 620     | -                   | 21      | 487                  | 870    |
| <i>Women, total</i>                                        | <i>Kvinder, i alt</i>      | 797     | 9                           | 845     | 1                   | 32      | 594                  | 968    |
| <i>Patients treated per 100 000 men in the age group</i>   |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 mænd i alderen</i>      |                            |         |                             |         |                     |         |                      |        |
|                                                            | 0-44                       | 11      | 14                          | 12      | -                   | 3       | 13                   | 6      |
|                                                            | 45-64                      | 53      | 28                          | 42      | -                   | 36      | 33                   | 33     |
|                                                            | 65+                        | 53      | 28                          | 40      | -                   | 39      | 47                   | 47     |
|                                                            | <i>Total rate</i>          |         |                             |         |                     |         |                      |        |
|                                                            | <i>Samlet rate</i>         | 28      | 19                          | 24      | -                   | 14      | 21                   | 20     |
| <i>Patients treated per 100 000 women in the age group</i> |                            |         |                             |         |                     |         |                      |        |
| <i>Patienter behandlet pr. 100 000 kvinder i alderen</i>   |                            |         |                             |         |                     |         |                      |        |
|                                                            | 0-44                       | 12      | 7                           | 14      | -                   | 8       | 11                   | 9      |
|                                                            | 45-64                      | 52      | 72                          | 50      | 27                  | 34      | 39                   | 29     |
|                                                            | 65+                        | 53      | 115                         | 55      | -                   | 69      | 57                   | 47     |
|                                                            | <i>Total rate</i>          |         |                             |         |                     |         |                      |        |
|                                                            | <i>Samlet rate</i>         | 29      | 38                          | 32      | 7                   | 22      | 26                   | 21     |
| <i>Average length of stay per patient treated</i>          |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. behandlet patient</i>        |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 11.2    | 11.2                        | 7.3     | 23.0                | 9.5     | 8.9                  | 10.5   |
| <i>Average length of stay per discharge</i>                |                            |         |                             |         |                     |         |                      |        |
| <i>Gennemsnitlig liggetid pr. udskrivning</i>              |                            |         |                             |         |                     |         |                      |        |
|                                                            |                            | 8.1     | 7.7                         | 5.1     | 11.5                | 7.9     | 7.3                  | 7.4    |

1 Average 2000-2004.

2 The figures cover treatment at the same hospital. If a patient is transferred to another hospital, this is recorded as a new treatment period.

1 Gennemsnit for årene 2000-2004.

2 Tallene dækker behandling ved et sygehus. Hvis en patient overflyttes til et andet sygehus, er der tale om en ny behandlingsperiode.

The table includes ICD-10: K71-K77.

Tabellen omfatter ICD-10: K71-K77.

Source: See table 3.4.1 \* Definition, see table 3.4.1

Kilde: Se tabel 3.4.1 \* Definition, se tabel 3.4.1

### 3.5 Surgical procedures

Tables 3.5.1-3.5.2 include information on selected surgical procedure groups, selected because of their high frequency and because the frequency of operations is influenced by differences in medical practice between the countries.

In order to present a more complete picture, Table 3.5.3 covers the most frequent procedures carried out as day surgery.

In order to give more detail, the groups are presented by sex, and in some cases by age, in Tables 3.5.5-3.5.18. In this way, the differences between the countries appear more clearly.

Comparisons of operations between various geographic areas are however difficult, and the comparisons contain a number of potential sources of error, which in principle are the same as those mentioned for the diagnosis-related statistics.

In addition, there are differences from country to country in the way in which operations in hospitals are counted.

### 3.5 Kirurgiske indgreb

Tabellerne 3.5.1-5.5.2 indeholder oplysninger om udvalgte operationsgrupper, som er udvalgt fordi de er hyppigt forekommende og fordi operationsomfanget i forskellig grad påvirkes af forskelle i medicinsk praksis i landene.

For at få et mere fuldkomment billede er der i tabel 3.5.3 medtaget de mest forekommende indgreb som sker uden indlæggelse – dagkirurgisk.

For at få et mere komplet billede, er grupperne medtaget fordelt på køn og i visse aldersgrupper i tabellerne 3.5.5.-3.5.18. Heraf fremgår forskellene mellem landene tydeligere.

Sammenligninger af operationer mellem geografiske områder er imidlertid vanskelige og indeholder en række potentielle fejlkilder, som i princippet er de samme som er nævnt for den diagnoserelaterede statistik.

Hertil kommer, at der er forskelle fra land til land i måden hvorpå operationer ved sygehuse tælles.

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**

**Table 3.5.1 Sixteen major surgical procedure groups, total numbers 2004**  
Seksten store operationsgrupper, i alt 2004

| NCSP codes                  |                                                                                      | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway | Sweden |
|-----------------------------|--------------------------------------------------------------------------------------|---------|-----------------------------|---------|---------------------|---------|--------|--------|
| ABC 01-26                   | <i>Disc operations</i>                                                               |         |                             |         |                     |         |        |        |
|                             | Disk-operationer                                                                     | 2 582   | 22                          | 3 280   | 14                  | 409     | 3 876  | 2 221  |
| BAA 20-60                   | <i>Partial and total thyroid excision</i>                                            |         |                             |         |                     |         |        |        |
|                             | Resektion af thyreoidea                                                              | 1 667   | 4                           | 1 810   | 3                   | 108     | 1 315  | 2 509  |
| CJC, CJD, CJE, CJF00, CJF10 | <i>Cataract surgery</i>                                                              |         |                             |         |                     |         |        |        |
|                             | Kataraktoperationer                                                                  | 24 507  | 103                         | 38 333  | 50                  | 2 108   | 22 393 | 53 876 |
| FNA; FNB; FNC; FND; FNE     | <i>Coronary anastomosis surgery</i>                                                  |         |                             |         |                     |         |        |        |
|                             | Coronar Anastomoser                                                                  | 2 885   | 30                          | 3 945   | 1                   | 131     | 4 063  | 10 053 |
| FNG 02; FNG 05              | <i>Percutaneous expansion of the coronary artery (PTCA)</i>                          |         |                             |         |                     |         |        |        |
|                             | Perkutan coronar angioplastik (PTCA)                                                 | 8 386   | 62                          | 5 470   | 1                   | 556     | 10 645 | 15 114 |
| HAB                         | <i>Excision of mammary gland (women)</i>                                             |         |                             |         |                     |         |        |        |
|                             | Resektion af mammae (kvinder)                                                        | 4 447   | 19                          | 4 083   | 18                  | 130     | 3 258  | 7 169  |
| HAC 10-25; HAC 99           | <i>Mastectomy (women)</i>                                                            |         |                             |         |                     |         |        |        |
|                             | Ablatio mammae (kvinder)                                                             | 2 556   | 21                          | 2 481   | 11                  | 59      | 1 470  | 3 860  |
| JE A                        | <i>Appendectomy</i>                                                                  |         |                             |         |                     |         |        |        |
|                             | Appendektomi                                                                         | 6 087   | 47                          | 7 323   | 43                  | 438     | 5 356  | 10 722 |
| JKA 20-21                   | <i>Cholecystectomy</i>                                                               |         |                             |         |                     |         |        |        |
|                             | Kolecystektomi                                                                       | 7 295   | 41                          | 8 300   | 49                  | 625     | 4 565  | 12 970 |
| KAS 10-20                   | <i>Kidney transplant</i>                                                             |         |                             |         |                     |         |        |        |
|                             | Nyretransplantation                                                                  | 174     | 2                           | 187     | 1                   | 2       | 259    | 365    |
| KEC                         | <i>Radical prostatectomy</i>                                                         |         |                             |         |                     |         |        |        |
|                             | Radikal prostatektomi                                                                | 352     | 4                           | 937     | 2                   | 51      | 379    | 2 267  |
| KED 22-72                   | <i>Prostatectomy, transurethral procedures</i>                                       |         |                             |         |                     |         |        |        |
|                             | Transurethral resektion af prostate                                                  | 4 380   | 18                          | 2 548   | 32                  | 234     | 4 990  | 7 977  |
| KED 00; KED 96              | <i>Open prostatectomy</i>                                                            |         |                             |         |                     |         |        |        |
|                             | Åben prostatektomi                                                                   | 102     | 1                           | 51      | -                   | 4       | 166    | 184    |
| LCC 10-20; LCD; LCE; LEF 13 | <i>Hysterectomy (including supravaginal hysterectomy and exenteration of pelvis)</i> |         |                             |         |                     |         |        |        |
|                             | Hysterektomi (inkl. supravaginal hysterektomi og bækkeneksentration)                 | 6 293   | 24                          | 9 465   | 46                  | 530     | 5 227  | 9 860  |
| MCA                         | <i>Caesarean section</i>                                                             |         |                             |         |                     |         |        |        |
|                             | Kejsersnit                                                                           | 13 217  | 88                          | 9 374   | 52                  | 668     | 8 655  | 16 820 |
| NFB; NFC                    | <i>Hip replacement</i>                                                               |         |                             |         |                     |         |        |        |
|                             | Hofteledsplastik                                                                     | 10 323  | 71                          | 9 278   | 48                  | 450     | 8 823  | 18 624 |

The NCSP codes refer to NOMESCO Classification of Surgical Procedures. Version 1.7. NOMESCO 65:2003.

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

Sources: D: National Board of Health; FI: Ministry of Health; F & Å: STAKES; I: Directorate of Health; N: Norwegian Patient Register; S: National Board of Health and Welfare

**Table 3.5.2 Sixteen major surgical procedure groups, per 100 000 inhabitants 2004**  
 Seksten store operationsgrupper, pr. 100 000 indbyggere 2004

| NCSP codes                  |                                                                                                   | Denmark | Faroe Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway | Sweden |
|-----------------------------|---------------------------------------------------------------------------------------------------|---------|-----------------------------|---------|---------------------|---------|--------|--------|
| ABC 01-26                   | <i>Disc operations</i>                                                                            |         |                             |         |                     |         |        |        |
|                             | Disk-operationer                                                                                  | 48      | 46                          | 63      | 54                  | 140     | 84     | 25     |
| BAA 20-60                   | <i>Partial and total thyroid excision</i>                                                         |         |                             |         |                     |         |        |        |
|                             | Resektion af thyreoidea                                                                           | 31      | 8                           | 35      | 12                  | 37      | 29     | 28     |
| CJC, CJD, CJE, CJF00, CJF10 | <i>Cataract surgery</i>                                                                           |         |                             |         |                     |         |        |        |
|                             | Kataraktoperationer                                                                               | 454     | 213                         | 733     | 189                 | 720     | 488    | 599    |
| FNA; FNB; FNC; FND; FNE     | <i>Coronary anastomosis surgery</i>                                                               |         |                             |         |                     |         |        |        |
|                             | Coronararastomoser                                                                                | 53      | 62                          | 75      | 2                   | 45      | 88     | 112    |
| FNG 02; FNG 05              | <i>Percutaneous expansion of the coronary artery (PTCA)</i>                                       |         |                             |         |                     |         |        |        |
|                             | Perkutan coronar angioplastik (PTCA)                                                              | 155     | 128                         | 105     | 3                   | 190     | 232    | 168    |
| HAB                         | <i>Excision of mammary gland (women)<sup>2)</sup></i>                                             |         |                             |         |                     |         |        |        |
|                             | Resektion af mammae (kvinder) <sup>2)</sup>                                                       | 158     | 78                          | 150     | 131                 | 89      | 141    | 158    |
| HAC 10-25; HAC 99           | <i>Mastectomy (women)<sup>2)</sup></i>                                                            |         |                             |         |                     |         |        |        |
|                             | Ablatio mammae (kvinder) <sup>2)</sup>                                                            | 85      | 86                          | 90      | 85                  | 40      | 63     | 85     |
| JEA                         | <i>Appendectomy</i>                                                                               |         |                             |         |                     |         |        |        |
|                             | Appendektomi                                                                                      | 113     | 97                          | 140     | 164                 | 150     | 117    | 119    |
| JKA 20-21                   | <i>Cholecystectomy</i>                                                                            |         |                             |         |                     |         |        |        |
|                             | Kolecystektomi                                                                                    | 135     | 85                          | 159     | 186                 | 214     | 99     | 144    |
| KAS 10-20                   | <i>Kidney transplant</i>                                                                          |         |                             |         |                     |         |        |        |
|                             | Nyretransplantation                                                                               | 3       | 4                           | 4       | 3                   | 1       | 6      | 4      |
| KEC                         | <i>Radical prostatectomy<sup>3)</sup></i>                                                         |         |                             |         |                     |         |        |        |
|                             | Radikal prostatektomi <sup>3)</sup>                                                               | 13      | 16                          | 37      | 18                  | 35      | 17     | 51     |
| KED 22-72                   | <i>Prostatectomy, transurethral procedures<sup>3)</sup></i>                                       |         |                             |         |                     |         |        |        |
|                             | Transurethral resekction af prostata <sup>3)</sup>                                                | 164     | 72                          | 100     | 249                 | 160     | 219    | 179    |
| KED 00; KED 96              | <i>Open prostatectomy<sup>3)</sup></i>                                                            |         |                             |         |                     |         |        |        |
|                             | Åben prostatektomi <sup>3)</sup>                                                                  | 4       | 4                           | 2       | 2                   | 3       | 7      | 4      |
| LCC 10-20; LCD; LCE; LEF 13 | <i>Hysterectomy (including supravaginal hysterectomy and exenteration of pelvis)<sup>2)</sup></i> |         |                             |         |                     |         |        |        |
|                             | Hysterektomi (inkl. supravaginal hysterektomi og bækkeneksentrering) <sup>2)</sup>                | 231     | 103                         | 354     | 342                 | 363     | 226    | 217    |
| MCA                         | <i>Caesarean section<sup>4)</sup></i>                                                             |         |                             |         |                     |         |        |        |
|                             | Kejsersnit <sup>4)</sup>                                                                          | 205     | 123                         | 162     | 193                 | 160     | 152    | 167    |
| NFB; NFC                    | <i>Hip replacement</i>                                                                            |         |                             |         |                     |         |        |        |
|                             | Hofteledsplastik                                                                                  | 191     | 147                         | 177     | 182                 | 154     | 192    | 207    |

The NCSP codes refer to NOMESCO Classification of Surgical Procedures. Version 1.7. NOMESCO 65:2003.

1 Average 2000-2004.

2 Per 100 000 women.

3 Per 100 000 men.

4 Per 1 000 deliveries.

1 Gennemsnit for årene 2000-2004.

2 Pr. 100 000 kvinder.

3 Pr. 100 000 mænd.

4 Pr. 1 000 fødsler.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.5.3 Fifteen surgical procedures partly carried out as day surgery in hospitals 2004**

|                                                                                                                            | NCSF codes                             | Denmark                    |                      |                        | Finland                    |                      |                        |
|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------|----------------------|------------------------|----------------------------|----------------------|------------------------|
|                                                                                                                            |                                        | Total number of procedures | Of which day surgery | Day surgery (per cent) | Total number of procedures | Of which day surgery | Day surgery (per cent) |
| <i>Carpal tunnel decompression of median nerve</i><br>Dekompression og lysis af medianus nerve                             | ACC51                                  | 4 402                      | 3 651                | 82.9                   | 7 286                      | 5 774                | 79.2                   |
| <i>Cataract surgery</i><br>Kataraktoperation                                                                               | CJC, CJD, CJE, CJF00, CJF10            | 27 089                     | 25 941               | 95.8                   | 37 906                     | 33 999               | 89.7                   |
| <i>Tonsillectomy and/or adenoidectomy</i><br>Tonsillektomi og/eller adenoidektomi                                          | EMB10, EMB20, EMB30                    | 7 987                      | 1 125                | 14.1                   | 15 886                     | 9 439                | 59.4                   |
| <i>Wedge resection of mammary gland (women only)</i><br>Segmentresektion af brystkirtel (kun kvinder)                      | HAB40                                  | 2 044                      | 18                   | 0.9                    | 1 364                      | 163                  | 12.0                   |
| <i>Inguinal and femoral hernia</i><br>Brok-operationer                                                                     | JAB, JAC                               | 12 187                     | 6 390                | 52.4                   | 11 760                     | 5 263                | 44.8                   |
| <i>Haemorrhoidectomy</i><br>Haemorrhoidectomia                                                                             | JHB00                                  | 2 110                      | 773                  | 36.6                   | 1 967                      | 470                  | 23.9                   |
| <i>Cholecystectomy, laparoscopic</i><br>Laparoskopisk cholecystektomi                                                      | JKA21                                  | 6 332                      | 633                  | 10.0                   | 6 522                      | 789                  | 12.1                   |
| <i>Transurethral resection of prostate (TURP)</i><br>Transurethral resektion af prostata (TURP)                            | KED22                                  | 3 813                      | 44                   | 1.2                    | 3 277                      | 7                    | 0.2                    |
| <i>Curettage and excision of endometrium in uterus and cervix uteri</i><br>Abrasio af endometrium i uterus og cervix uteri | LCA10-16, LCB28, LCB32, LDA10          | 11 073                     | 8 078                | 73.0                   | 4 588                      | 2 952                | 64.3                   |
| <i>Termination of pregnancy</i><br>Abort-operationer                                                                       | LCH                                    | 11 669                     | 7 283                | 62.4                   | 5 148                      | 3 978                | 77.3                   |
| <i>Female sterilization</i><br>Sterilisation af kvinder                                                                    | LGA                                    | 5 011                      | 3 173                | 63.3                   | 4 718                      | 3 755                | 79.6                   |
| <i>Removal of implanted devices from bone</i><br>Fjernelse af osteosyntese                                                 | NAU, NBU, NCU, NDU, NEU, NFU, NGU, NHU | 13 425                     | 6 859                | 51.1                   | 5 416                      | 2 762                | 51.0                   |
| <i>Knee arthroscopy</i><br>Artroskopi af knæled                                                                            | NGA11                                  | 8 370                      | 5 951                | 71.1                   | 4 138                      | 2 649                | 64.0                   |
| <i>Arthroscopic operations on meniscus of knee</i><br>Artroskopisk meniskoperation på knæ                                  | NGD01, NGD11, NGD21, NGD91             | 10 321                     | 6 595                | 63.9                   | 11 112                     | 7 966                | 71.7                   |
| <i>Vein ligation and stripping on leg</i><br>Fjernelse af åreknuder på ben                                                 | PHB13-14, PHD                          | 8 816                      | 6 919                | 78.5                   | 7 769                      | 4 549                | 58.6                   |

- 1 The figures are estimated based on a coverage of 80 per cent. Figures for cataract surgery are data for 2002 from the Swedish cataract register with a coverage of 95 per cent, including only CJC, CJD and CJE.
- 2 Day-surgery procedures are under-reported. The amount of missing data varies for different procedures. The amount of missing data is estimated to be on average 20 per cent, but is particular large for cataract surgery. according to the Swedish Ophtalmologist Assosiation, 771 940 cataract operations were carried out in 2004.

Source: See Table 3.5.1.

**Femten kirurgiske indgreb, der delvist gennemføres som dagkirurgi Tabel 3.5.3  
på sygehuse 2004**

| Norway                     |                      |                        | Sweden <sup>1)</sup>       |                                    |                        |
|----------------------------|----------------------|------------------------|----------------------------|------------------------------------|------------------------|
| Total number of procedures | Of which day surgery | Day surgery (per cent) | Total number of procedures | Of which day surgery <sup>2)</sup> | Day surgery (per cent) |
| 6 399                      | 6 019                | 94.1                   | 9 019                      | 8 605                              | 95.4                   |
| 24 246                     | 22 208               | 91.6                   | 53 581                     | 52 029                             | 97.1                   |
| 13 174                     | 6 122                | 46.5                   | 13 186                     | 5 646                              | 42.8                   |
| 1 852                      | 747                  | 40.3                   | 4 930                      | 1 339                              | 27.2                   |
| 8 330                      | 5 137                | 61.7                   | 17 452                     | 12 091                             | 69.3                   |
| 2 846                      | 1 639                | 57.6                   | 2 347                      | 1 425                              | 60.7                   |
| 4 096                      | 510                  | 12.5                   | 9 744                      | 1 291                              | 13.2                   |
| 4 493                      | 9                    | 0.2                    | 6 597                      | 118                                | 1.8                    |
| 5 977                      | 4 080                | 68.3                   | 14 365                     | 11 574                             | 80.6                   |
| 13 200                     | 12 812               | 97.1                   | 15 655                     | 14 267                             | 91.1                   |
| 1 735                      | 872                  | 50.3                   | 3 613                      | 2 933                              | 81.2                   |
| 8 821                      | 3 727                | 42.3                   | 13 295                     | 8 568                              | 64.4                   |
| 4 912                      | 3 722                | 75.8                   | 7 046                      | 6 333                              | 89.9                   |
| 14 702                     | 12 859               | 87.5                   | 11 713                     | 10 928                             | 93.3                   |
| 8 445                      | 6 933                | 82.1                   | 5 567                      | 4 743                              | 85.2                   |

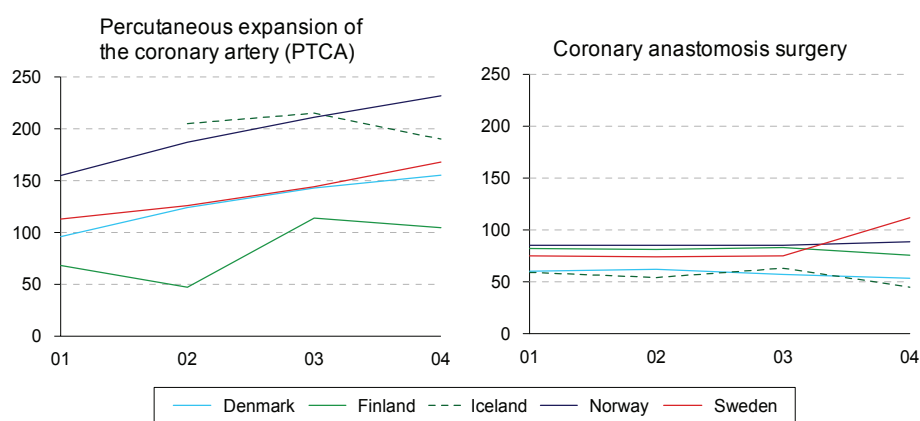
1 Tallene er beregnet udfra en 80 procents dækningsgrad. Tal for kataraktoperation er data for 2002 fra det svenske kataraktregister med 95 procent dækningsgrad. Kataraktregistret inkluderer kun CJC, CJD og CJE.

2 Der findes en underrapportering i antallet af dagkirurgiske indgreb. Størrelsen af dette varierer fra indgreb til indgreb, men er beregnet til ca. 20 pct. Det er især et stort bortfald af kataraktoperationer. Ifølge det svenske kataraktregister blev der i 2004 gennemført 771.840 operationer.

Kilde: Se tabel 3.5.1

**Figure 3.5.1 Coronary anastomosis surgery and PTCA, per 100 000 inhabitants 2001-2004**

Coronaranastomoser og PTCA, pr. 100 000 indbyggere 2001-2004

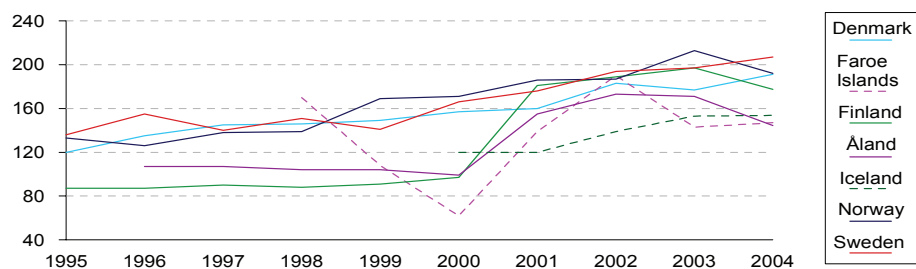


Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Figure 3.5.2 Hip replacement per 100 000 inhabitants 1995-2004**

Hofteledsplastik, pr. 100 000 indbyggere 1995-2004



Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.4 Surgical procedures in connection with cancer diagnoses,  
total and per 100 000 inhabitants 2004**

Operationer i forbindelse med kræftdiagnoser, i alt og pr. 100 000 indbyggere 2004

| NCSP<br>codes                                                                                                                                                                                                                         | Denmark | Faroe<br>Islands <sup>1)</sup> | Finland | Åland <sup>1)</sup> | Iceland | Norway | Sweden |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------|---------|---------------------|---------|--------|--------|
| <i>Total i alt</i>                                                                                                                                                                                                                    |         |                                |         |                     |         |        |        |
| HAB <i>Excision of the<br/>mammary gland (women)</i><br>Resektion af mammae (kvinder)<br>(ICD-9: 174; ICD-10: C50)                                                                                                                    | 1 955   | 17                             | 9       | -                   | 72      | 1 747  | 3 810  |
| HAC <i>Mastectomy (women)</i><br>10-25; Ablatio mammae (kvinder)<br>HAC (ICD-9: 174; ICD-10: C50)<br>99                                                                                                                               | 2 074   | 20                             | 2 334   | 11                  | 56      | 1 303  | 3 454  |
| KEC <i>Radical prostatectomy</i><br>Radikal prostatektomi<br>(ICD-9: 185; ICD-10: C61)                                                                                                                                                | 342     | 4                              | 717     | 2                   | 51      | 373    | 2 258  |
| KED <i>Prostatectomy, transurethral<br/>procedures</i><br>22-72 Transurethral resection of prostata<br>(ICD-9: 185; ICD-10: C61)                                                                                                      | 530     | 5                              | 447     | 7                   | 57      | 865    | 1 369  |
| LCC <i>Hysterectomy (including supravaginal<br/>10-20; hysterectomy and exenteration of pelvis)</i><br>LCD; Hysterektomi (inkl. supravaginal hys-<br>LCE; terektomi og bækkeneksentrering)<br>LEF 13 (ICD-9: 180-184; ICD-10: C51-58) | 1 083   | 14                             | 4 708   | 29                  | 56      | 994    | 2 038  |
| <i>Per 100 000 inhabitants<br/>Pr. 100 000 indbyggere</i>                                                                                                                                                                             |         |                                |         |                     |         |        |        |
| <i>Partial excision of the<br/>mammary gland (women)<sup>2)</sup></i><br>Resektion af mammae (kvinder) <sup>2)</sup>                                                                                                                  | 72      | 73                             | 0       | -                   | 49      | 75     | 84     |
| <i>Mastectomy (women)<sup>2)</sup></i><br>Ablatio mammae (kvinder) <sup>2)</sup>                                                                                                                                                      | 76      | 86                             | 87      | 85                  | 38      | 56     | 76     |
| <i>Radical prostatectomy<sup>3)</sup></i><br>Radikal prostatektomi <sup>3)</sup>                                                                                                                                                      | 13      | 16                             | 28      | 18                  | 35      | 16     | 51     |
| <i>Prostatectomy, transurethral<br/>procedures<sup>3)</sup></i><br>Transurethral resection of prostata <sup>3)</sup>                                                                                                                  | 20      | 20                             | 17      | 51                  | 39      | 38     | 31     |
| <i>Hysterectomy (including supravaginal<br/>hysterectomy and exenteration of pelvis)<sup>3)</sup></i><br>Hysterektomi (inkl. supravaginal hys-<br>terektomi og bækkeneksentrering) <sup>3)</sup>                                      | 40      | 60                             | 176     | 215                 | 38      | 43     | 45     |

The NCSP codes refer to NOMESCO Classification of Surgical Procedures. Version 1.7. NOMESCO 65:2003.

- 1 Average 2000-2004.  
2 Per 100 000 women.  
3 Per 100 000 men.

- 1 Gennemsnit for årene 2000-2004.  
2 Pr. 100 000 kvinder.  
3 Pr. 100 000 mænd.

Sources: See Table 3.5.1  
Kilder: Se tabel 3.5.1

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.5.5 Disc operations by sex and age 2004**

Disk-operationer fordelt på køn og alder 2004

| Age<br>Alder       | Denmark |       | Faroe Islands <sup>1)</sup> |    | Finland |       | Iceland |     | Norway |       | Sweden |       |
|--------------------|---------|-------|-----------------------------|----|---------|-------|---------|-----|--------|-------|--------|-------|
|                    | M       | W     | M                           | W  | M       | W     | M       | W   | M      | W     | M      | W     |
| <15                | -       | -     | -                           | -  | -       | 5     | -       | 1   | 1      | -     | -      | 1     |
| 15-24              | 48      | 17    | 3                           | -  | 109     | 60    | 11      | 6   | 81     | 58    | 34     | 31    |
| 25-44              | 628     | 523   | 4                           | 2  | 948     | 616   | 106     | 93  | 1 090  | 859   | 591    | 529   |
| 45-64              | 578     | 495   | 3                           | 5  | 781     | 519   | 85      | 69  | 872    | 672   | 448    | 394   |
| 65+                | 123     | 170   | 2                           | 3  | 131     | 111   | 19      | 19  | 114    | 129   | 96     | 97    |
| Total I alt        | 1 377   | 1 205 | 12                          | 10 | 1 969   | 1 311 | 221     | 188 | 2 158  | 1 718 | 1 169  | 1 052 |
| <i>Per 100 000</i> |         |       |                             |    |         |       |         |     |        |       |        |       |
| <i>in the age</i>  |         |       |                             |    |         |       |         |     |        |       |        |       |
| <i>group</i>       |         |       |                             |    |         |       |         |     |        |       |        |       |
| Pr. 100 000        |         |       |                             |    |         |       |         |     |        |       |        |       |
| i alderen          |         |       |                             |    |         |       |         |     |        |       |        |       |
| 15-24              | 16      | 6     | 86                          | -  | 33      | 19    | 50      | 28  | 28     | 21    | 6      | 6     |
| 25-44              | 80      | 68    | 58                          | 34 | 135     | 91    | 249     | 223 | 163    | 132   | 48     | 44    |
| 45-64              | 80      | 69    | 50                          | 94 | 107     | 71    | 257     | 215 | 152    | 120   | 38     | 34    |
| 65+                | 36      | 37    | 69                          | 86 | 40      | 22    | 123     | 101 | 40     | 33    | 14     | 11    |
| Total I alt        | 52      | 44    | 48                          | 43 | 77      | 49    | 151     | 129 | 95     | 74    | 26     | 23    |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: ABC 01-26.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.6 Partial and total thyroid excision by sex and age 2004**

Resektion af thyreoidea, fordelt på køn og alder 2004

| Age<br>Alder                                                              | Denmark |       | Finland |       | Iceland |     | Norway |       | Sweden |       |
|---------------------------------------------------------------------------|---------|-------|---------|-------|---------|-----|--------|-------|--------|-------|
|                                                                           | M       | W     | M       | W     | M       | W   | M      | W     | M      | W     |
| <15                                                                       | 1       | 5     | 4       | 7     | -       | -   | 1      | 4     | 7      | 18    |
| 15-24                                                                     | 10      | 39    | 8       | 57    | 3       | 5   | 8      | 31    | 20     | 128   |
| 25-44                                                                     | 87      | 488   | 54      | 419   | 7       | 30  | 58     | 417   | 122    | 674   |
| 45-54                                                                     | 92      | 396   | 65      | 443   | 4       | 22  | 53     | 236   | 100    | 417   |
| 55-64                                                                     | 71      | 245   | 8       | 356   | 2       | 13  | 60     | 229   | 105    | 394   |
| 65-74                                                                     | 41      | 128   | 43      | 239   | 4       | 7   | 33     | 100   | 66     | 236   |
| 75-84                                                                     | 13      | 48    | 21      | 79    | 2       | 6   | 10     | 63    | 54     | 144   |
| 85+                                                                       | 1       | 2     | 3       | 4     | -       | 3   | 1      | 11    | 3      | 21    |
| Total I alt                                                               | 316     | 1 351 | 206     | 1 604 | 22      | 86  | 224    | 1 091 | 477    | 2 032 |
| <i>Per 100 000<br/>in the age<br/>group<br/>Pr. 100 000<br/>i alderen</i> |         |       |         |       |         |     |        |       |        |       |
| 15-24                                                                     | 3       | 13    | 2       | 18    | 14      | 24  | 3      | 11    | 4      | 24    |
| 25-44                                                                     | 11      | 64    | 8       | 62    | 16      | 72  | 9      | 64    | 10     | 57    |
| 45-54                                                                     | 25      | 110   | 16      | 114   | 20      | 116 | 17     | 78    | 17     | 72    |
| 55-64                                                                     | 20      | 70    | 2       | 104   | 15      | 99  | 23     | 90    | 18     | 68    |
| 65-74                                                                     | 20      | 56    | 21      | 97    | 46      | 74  | 22     | 58    | 19     | 60    |
| 75-84                                                                     | 11      | 29    | 20      | 42    | 37      | 88  | 10     | 41    | 22     | 42    |
| 85+                                                                       | 3       | 3     | 15      | 6     | -       | 123 | 4      | 17    | 4      | 14    |
| Total I alt                                                               | 12      | 50    | 8       | 60    | 15      | 59  | 10     | 47    | 11     | 45    |

NCSP codes covered: BAA 20-60.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.7 Cataract surgery by sex and age 2004**

Kataraktoperationer, efter køn og alder 2004

| Age<br>Alder                        | Denmark |        | Faroe Islands <sup>1)</sup> |       | Finland |        | Norway |        | Sweden <sup>2)</sup> |        |
|-------------------------------------|---------|--------|-----------------------------|-------|---------|--------|--------|--------|----------------------|--------|
|                                     | M       | W      | M                           | W     | M       | W      | M      | W      | M                    | W      |
| <45                                 | 293     | 249    | 3                           | 2     | 275     | 232    | 227    | 181    | 460                  | 328    |
| 45-64                               | 1 788   | 2 021  | 15                          | 7     | 2 565   | 2 855  | 1 113  | 1 242  | 3 331                | 3 918  |
| 65-74                               | 2 353   | 4 072  | 11                          | 18    | 3 751   | 7 305  | 1 627  | 2 764  | 4 770                | 8 166  |
| 75-84                               | 3 417   | 6 852  | 9                           | 32    | 5 202   | 12 440 | 3 653  | 7 188  | 8 241                | 16 659 |
| 85+                                 | 1 029   | 2 433  | 2                           | 4     | 1 001   | 2 707  | 1 345  | 3 053  | 2 580                | 5 423  |
| Total I alt                         | 8 880   | 15 627 | 40                          | 63    | 12 794  | 25 539 | 7 965  | 14 428 | 19 382               | 34 494 |
| <i>Per 100 000 in the age group</i> |         |        |                             |       |         |        |        |        |                      |        |
| <i>Pr. 100 000 i alderen</i>        |         |        |                             |       |         |        |        |        |                      |        |
| 45-64                               | 249     | 283    | 251                         | 132   | 353     | 390    | 195    | 222    | 282                  | 337    |
| 65-74                               | 1 162   | 1 793  | 651                         | 1 116 | 1 856   | 2 973  | 1 072  | 1 615  | 1 338                | 2 066  |
| 75-84                               | 3 011   | 4 103  | 930                         | 2 328 | 5 007   | 6 632  | 3 472  | 4 631  | 3 406                | 4 908  |
| 85+                                 | 3 569   | 3 463  | 766                         | 802   | 5 009   | 4 302  | 4 957  | 4 650  | 3 817                | 3 686  |
| Total I alt                         | 332     | 573    | 159                         | 272   | 500     | 956    | 350    | 623    | 435                  | 760    |

1 Average 2000-2004.

2 2002. Data from the Swedish cataract register with a coverage of 95 per cent. Including only CJC, CJD and CJE.

1 Gennemsnit for årene 2000-2004.

2 2002. Data fra det svenske kataraktregister med 95 procent dækningsgrad. Inkluderer kun CJC, CJD og CJE.

NCSP codes covered: CJC, CJD, CJE, CJF00, CJF10

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.8 Coronary anastomosis surgery by sex and age 2004**  
 Coronaranastomoser efter køn og alder 2004

| Age<br>Alder                                                     | Denmark |     | Faroe Island <sup>1)</sup> |     | Finland |       | Iceland |     | Norway |     | Sweden |       |
|------------------------------------------------------------------|---------|-----|----------------------------|-----|---------|-------|---------|-----|--------|-----|--------|-------|
|                                                                  | M       | W   | M                          | W   | M       | W     | M       | W   | M      | W   | M      | W     |
| <45                                                              | 49      | 10  | 2                          | -   | 55      | 4     | 1       | -   | 68     | 13  | 100    | 29    |
| 45-54                                                            | 225     | 42  | 3                          | 1   | 341     | 48    | 8       | 3   | 343    | 51  | 673    | 124   |
| 55-64                                                            | 687     | 106 | 7                          | 1   | 899     | 153   | 29      | 8   | 935    | 155 | 2 317  | 446   |
| 65-74                                                            | 889     | 252 | 5                          | 2   | 1 150   | 433   | 39      | 7   | 1 033  | 363 | 2 868  | 874   |
| 75-84                                                            | 433     | 174 | 5                          | 4   | 488     | 353   | 26      | 9   | 661    | 382 | 1 754  | 809   |
| 85+                                                              | 11      | 7   | -                          | -   | 12      | 9     | 1       | -   | 30     | 29  | 38     | 21    |
| Total I alt                                                      | 2 294   | 591 | 22                         | 8   | 2 945   | 1 000 | 104     | 27  | 3 070  | 993 | 7 750  | 2 303 |
| Per 100 000 i<br>in the age<br>group<br>Pr. 100 000 i<br>alderen |         |     |                            |     |         |       |         |     |        |     |        |       |
| 45-54                                                            | 61      | 12  | 93                         | 34  | 86      | 12    | 40      | 16  | 110    | 17  | 113    | 21    |
| 55-64                                                            | 196     | 30  | 55                         | 43  | 271     | 45    | 217     | 61  | 360    | 61  | 395    | 77    |
| 65-74                                                            | 439     | 111 | 296                        | 124 | 569     | 176   | 444     | 74  | 681    | 212 | 804    | 221   |
| 75-84                                                            | 382     | 104 | 517                        | 291 | 470     | 188   | 483     | 131 | 628    | 246 | 725    | 238   |
| 85+                                                              | 38      | 10  | -                          | -   | 60      | 14    | 75      | -   | 111    | 44  | 56     | 14    |
| Total I alt                                                      | 86      | 22  | 88                         | 34  | 115     | 37    | 71      | 19  | 135    | 43  | 174    | 51    |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: FNA; FNB; FNC; FND; FNE.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.9 Percutaneous expansion of the coronary artery (PTCA) by sex and age 2004**  
 Perkutan coronar angioplastik (PTCA) efter køn og alder 2004

| Age<br>Alder                        | Denmark |       | Faroe Islands |     | Finland |       | Norway |       | Sweden <sup>2)</sup> |       |
|-------------------------------------|---------|-------|---------------|-----|---------|-------|--------|-------|----------------------|-------|
|                                     | M       | W     | M             | W   | M       | W     | M      | W     | M                    | W     |
| <45                                 | 367     | 89    | 1             | -   | 190     | 41    | 420    | 74    | 375                  | 74    |
| 45-54                               | 1 113   | 238   | 4             | 2   | 364     | 176   | 1 478  | 301   | 1 573                | 396   |
| 55-64                               | 2 025   | 571   | 25            | 1   | 1 403   | 395   | 2 595  | 638   | 3 604                | 996   |
| 65-74                               | 1 648   | 745   | 10            | 5   | 1 338   | 648   | 2 156  | 820   | 3 267                | 1 423 |
| 75-84                               | 839     | 587   | 5             | 6   | 243     | 562   | 1 205  | 738   | 1 918                | 1 202 |
| 85+                                 | 85      | 79    | 2             | 1   | 39      | 71    | 127    | 93    | 151                  | 135   |
| Total I alt                         | 6 077   | 2 309 | 47            | 15  | 3 577   | 1 893 | 7 981  | 2 664 | 10 888               | 4 226 |
| <i>Per 100 000 in the age group</i> |         |       |               |     |         |       |        |       |                      |       |
| <i>Pr. 100 000 i alderen</i>        |         |       |               |     |         |       |        |       |                      |       |
| 45-54                               | 302     | 66    | 124           | 68  | 92      | 45    | 473    | 99    | 265                  | 68    |
| 55-64                               | 577     | 162   | 912           | 43  | 423     | 116   | 999    | 250   | 614                  | 172   |
| 65-74                               | 814     | 328   | 592           | 310 | 662     | 264   | 1 421  | 479   | 916                  | 360   |
| 75-84                               | 739     | 351   | 517           | 437 | 234     | 300   | 1 145  | 475   | 793                  | 354   |
| 85+                                 | 295     | 112   | 766           | 201 | 195     | 113   | 468    | 142   | 223                  | 92    |
| Total I alt                         | 227     | 85    | 187           | 65  | 140     | 71    | 351    | 115   | 244                  | 93    |

1 Average 2000-2004.

2 NCSP: F00-F06.

1 Gennemsnit for årene 2000-2004.

2 NCSP: F00-F06.

NCSP codes covered: FNG 02; FNG 05.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.10 Excision of mammary gland by age, women 2004**  
 Resektion af mammae, kvinder, fordelt på alder 2004

| Age Alder                           | Denmark | Faroe Islands <sup>1)</sup> | Finland | Iceland | Norway | Sweden |
|-------------------------------------|---------|-----------------------------|---------|---------|--------|--------|
| <15                                 | 4       | -                           | 2       | -       | -      | 3      |
| 15-24                               | 156     | 1                           | 149     | 3       | 81     | 231    |
| 25-44                               | 1 035   | 3                           | 756     | 35      | 558    | 1 355  |
| 45-64                               | 2 171   | 10                          | 2 263   | 57      | 1 869  | 3 788  |
| 65-74                               | 612     | 2                           | 590     | 23      | 522    | 1 273  |
| 75-84                               | 270     | -                           | 198     | 8       | 188    | 431    |
| 85+                                 | 62      | 2                           | 35      | 4       | 40     | 88     |
| Total I alt                         | 4 310   | 18                          | 3 993   | 130     | 3 258  | 7 169  |
| <i>Per 100 000 in the age group</i> |         |                             |         |         |        |        |
| <i>Pr. 100 000 i alderen</i>        |         |                             |         |         |        |        |
| 15-24                               | 54      | 33                          | 47      | 14      | 30     | 44     |
| 25-44                               | 135     | 51                          | 112     | 84      | 86     | 114    |
| 45-64                               | 304     | 189                         | 309     | 178     | 335    | 326    |
| 65-74                               | 270     | 124                         | 240     | 242     | 305    | 322    |
| 75-84                               | 162     | -                           | 106     | 117     | 121    | 127    |
| 85+                                 | 88      | 401                         | 56      | 164     | 61     | 60     |
| Total I alt                         | 158     | 78                          | 150     | 89      | 141    | 158    |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: HAB.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**

**Table 3.5.11 Mastectomy, women, by age 2004**

Ablatio mammae, kvinder, fordelt på alder 2004

| Age Alder                           | Denmark | Faroe Islands <sup>1)</sup> | Finland | Iceland | Norway | Sweden |
|-------------------------------------|---------|-----------------------------|---------|---------|--------|--------|
| <15                                 | -       | -                           | -       | -       | -      | -      |
| 15-24                               | 5       | -                           | 3       | -       | 1      | 9      |
| 25-44                               | 238     | 1                           | 253     | 10      | 173    | 482    |
| 45-64                               | 1 034   | 11                          | 1 157   | 28      | 637    | 1 680  |
| 65-74                               | 491     | 2                           | 493     | 12      | 246    | 747    |
| 75-84                               | 440     | 4                           | 392     | 5       | 296    | 695    |
| 85+                                 | 107     | 2                           | 93      | 4       | 117    | 247    |
| Total I alt                         | 2 315   | 20                          | 2 391   | 59      | 1 470  | 3 860  |
| <i>Per 100 000 in the age group</i> |         |                             |         |         |        |        |
| <i>Pr. 100 000 i alderen</i>        |         |                             |         |         |        |        |
| 15-24                               | 2       | -                           | 1       | -       | -      | 2      |
| 25-44                               | 31      | 17                          | 37      | 24      | 27     | 41     |
| 45-64                               | 145     | 208                         | 158     | 87      | 114    | 145    |
| 65-74                               | 216     | 124                         | 201     | 126     | 144    | 189    |
| 75-84                               | 263     | 291                         | 209     | 73      | 191    | 205    |
| 85+                                 | 152     | 401                         | 148     | 164     | 178    | 168    |
| Total I alt                         | 85      | 86                          | 90      | 40      | 63     | 85     |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: HAC 10-25; HAC 99.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.12 Appendectomy by sex and age 2004**

Appendektomi fordelt på køn og alder 2004

| Age Alder                           | Denmark |       | Faroe Islands <sup>1)</sup> |     | Finland |       | Iceland |     | Norway |       | Sweden |       |
|-------------------------------------|---------|-------|-----------------------------|-----|---------|-------|---------|-----|--------|-------|--------|-------|
|                                     | M       | W     | M                           | W   | M       | W     | M       | W   | M      | W     | M      | W     |
| <15                                 | 774     | 628   | 9                           | 7   | 251     | 458   | 69      | 55  | 473    | 410   | 1 328  | 940   |
| 15-24                               | 593     | 594   | 7                           | 2   | 822     | 929   | 69      | 69  | 669    | 657   | 1 370  | 1 085 |
| 25-44                               | 818     | 863   | 11                          | 2   | 999     | 1 289 | 51      | 51  | 930    | 830   | 1 616  | 1 361 |
| 45-64                               | 472     | 659   | 4                           | 4   | 833     | 1 039 | 26      | 31  | 470    | 501   | 914    | 1 095 |
| 65+                                 | 255     | 431   | 1                           | -   | 305     | 398   | 11      | 6   | 188    | 228   | 444    | 569   |
| Total I alt                         | 2 912   | 3 175 | 32                          | 15  | 3 210   | 4 113 | 226     | 212 | 2 730  | 2 626 | 5 672  | 5 050 |
| <i>Per 100 000 in the age group</i> |         |       |                             |     |         |       |         |     |        |       |        |       |
| <i>Pr. 100 000 i alderen</i>        |         |       |                             |     |         |       |         |     |        |       |        |       |
| <15                                 | 148     | 127   | 157                         | 128 | 54      | 102   | 206     | 171 | 101    | 92    | 163    | 121   |
| 15-24                               | 196     | 204   | 200                         | 66  | 247     | 292   | 314     | 327 | 235    | 240   | 247    | 205   |
| 25-44                               | 104     | 113   | 159                         | 34  | 142     | 191   | 120     | 122 | 139    | 128   | 131    | 114   |
| 45-64                               | 66      | 92    | 67                          | 76  | 114     | 142   | 78      | 97  | 82     | 90    | 77     | 94    |
| 65+                                 | 74      | 93    | 34                          | -   | 94      | 80    | 71      | 32  | 66     | 58    | 67     | 65    |
| Total I alt                         | 109     | 116   | 128                         | 65  | 126     | 154   | 154     | 145 | 120    | 113   | 127    | 111   |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: JEA.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.13 Cholecystectomy by sex and age 2004**

Kolecystectomi fordelt på køn og alder 2004

| Age Alder                           | Denmark |       | Faroe Islands <sup>1)</sup> |     | Finland |       | Iceland |     | Norway |       | Sweden |       |
|-------------------------------------|---------|-------|-----------------------------|-----|---------|-------|---------|-----|--------|-------|--------|-------|
|                                     | M       | W     | M                           | W   | M       | W     | M       | W   | M      | W     | M      | W     |
| <25                                 | 45      | 310   | 1                           | 3   | 45      | 236   | 5       | 36  | 31     | 213   | 94     | 516   |
| 25-44                               | 529     | 2 302 | 4                           | 11  | 483     | 1 595 | 39      | 157 | 299    | 1 293 | 981    | 3 186 |
| 45-64                               | 856     | 1 905 | 4                           | 12  | 1201    | 2 392 | 66      | 181 | 486    | 1 242 | 1 904  | 3 326 |
| 65+                                 | 474     | 874   | 2                           | 4   | 820     | 1 528 | 54      | 87  | 372    | 629   | 1 273  | 1 690 |
| Total I alt                         | 1 904   | 5 391 | 11                          | 30  | 2 549   | 5 751 | 164     | 461 | 1 188  | 3 377 | 4 252  | 8 718 |
| <i>Per 100 000 in the age group</i> |         |       |                             |     |         |       |         |     |        |       |        |       |
| <i>Pr. 100 000 i alderen</i>        |         |       |                             |     |         |       |         |     |        |       |        |       |
| <25                                 | 5       | 39    | 11                          | 35  | 6       | 31    | 9       | 68  | 4      | 30    | 7      | 40    |
| 25-44                               | 67      | 301   | 58                          | 186 | 69      | 236   | 92      | 376 | 45     | 199   | 79     | 268   |
| 45-64                               | 119     | 267   | 67                          | 227 | 165     | 327   | 199     | 565 | 85     | 222   | 161    | 286   |
| 65+                                 | 137     | 188   | 69                          | 115 | 252     | 308   | 348     | 463 | 131    | 160   | 191    | 192   |
| Total I alt                         | 71      | 198   | 44                          | 129 | 100     | 215   | 112     | 316 | 52     | 146   | 95     | 192   |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: JKA 20-21.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.14 Kidney transplant by sex and age 2004**

Nyretransplantationer, fordelt på køn og alder 2004

| Age Alder                           | Denmark |    | Finland |    | Norway |    | Sweden |     |
|-------------------------------------|---------|----|---------|----|--------|----|--------|-----|
|                                     | M       | W  | M       | W  | M      | W  | M      | W   |
| <15                                 | 6       | 3  | 4       | 5  | 5      | 2  | 8      | 4   |
| 15-24                               | 3       | 8  | 1       | 4  | 5      | 5  | 11     | 2   |
| 25-44                               | 35      | 27 | 48      | 12 | 48     | 24 | 56     | 45  |
| 45-54                               | 24      | 23 | 30      | 17 | 36     | 21 | 62     | 41  |
| 55-64                               | 23      | 17 | 35      | 11 | 41     | 20 | 67     | 40  |
| 65+                                 | 2       | 3  | 14      | 6  | 37     | 15 | 19     | 10  |
| Total I alt                         | 93      | 81 | 132     | 55 | 172    | 87 | 223    | 142 |
| <i>Per 100 000 in the age group</i> |         |    |         |    |        |    |        |     |
| Pr. 100 000 i alderen               |         |    |         |    |        |    |        |     |
| 15-24                               | 1       | 3  | 0       | 1  | 2      | 2  | 2      | -   |
| 25-44                               | 4       | 4  | 7       | 2  | 7      | 4  | 5      | 4   |
| 45-54                               | 7       | 6  | 8       | 4  | 12     | 7  | 10     | 7   |
| 55-64                               | 7       | 5  | 11      | 3  | 16     | 8  | 11     | 7   |
| 65+                                 | 1       | 1  | 4       | 1  | 13     | 4  | 3      | 1   |
| Total I alt                         | 3       | 3  | 5       | 2  | 8      | 4  | 5      | 3   |

NCSP codes covered: KAS 10-20.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.15 Prostatectomy, transurethral procedures and open prostatectomy by age, men 2004**

Transurethral resektion af prostata og åben prostatektomi, mænd fordelt på alder 2004

| Age Alder                           | Denmark | Finland | Iceland | Norway | Sweden |
|-------------------------------------|---------|---------|---------|--------|--------|
| <45                                 | 47      | 29      | -       | -      | 15     |
| 45-64                               | 1 150   | 1 015   | 53      | 54     | 1 005  |
| 65+                                 | 3 285   | 1 552   | 181     | 184    | 4 136  |
| Total I alt                         | 4 482   | 2 596   | 234     | 238    | 5 156  |
| <i>Per 100 000 in the age group</i> |         |         |         |        |        |
| Pr. 100 000 i alderen               |         |         |         |        |        |
| 45-64                               | 160     | 139     | 160     | 163    | 176    |
| 65+                                 | 953     | 476     | 1 167   | 1 187  | 1 456  |
| Total I alt                         | 168     | 102     | 160     | 162    | 226    |

NCSP codes covered: KED 00, KED 22-72, KED 96.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.16 Hysterectomy (including supravaginal hysterectomy and exenteration of pelvis) by age, women 2004**

Hysterektomi (inkl. supravaginal hysterektomi og bækkeneksentration), kvinder fordelt på alder 2004

| Age Alder                           | Denmark | Faroe Islands <sup>1)</sup> | Finland | Iceland | Norway | Sweden |
|-------------------------------------|---------|-----------------------------|---------|---------|--------|--------|
| <25                                 | 3       | -                           | -       | 2       | 4      | 15     |
| 25-44                               | 2 031   | 8                           | 2 231   | 207     | 1 473  | 2 374  |
| 45-64                               | 3 203   | 13                          | 5 534   | 256     | 2 809  | 5 167  |
| 65+                                 | 1 056   | 3                           | 1 696   | 65      | 941    | 2 304  |
| Total I alt                         | 6 293   | 24                          | 9 465   | 530     | 5 227  | 9 860  |
| <i>Per 100 000 in the age group</i> |         |                             |         |         |        |        |
| <i>Pr. 100 000 i alderen</i>        |         |                             |         |         |        |        |
| 25-44                               | 265     | 135                         | 330     | 496     | 227    | 200    |
| 45-64                               | 449     | 246                         | 757     | 799     | 503    | 445    |
| 65+                                 | 227     | 86                          | 342     | 346     | 240    | 261    |
| Total I alt                         | 231     | 103                         | 354     | 363     | 226    | 217    |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: LCC 10-20; LCD; LCE; LEF 13.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

**Table 3.5.17 Caesarean section, by age, women 2004**

Kejsersnit, kvinder fordelt på alder 2004

| Age Alder                   | Denmark <sup>1)</sup> | Faroe Islands <sup>2)</sup> | Finland | Iceland | Norway | Sweden <sup>1)</sup> |
|-----------------------------|-----------------------|-----------------------------|---------|---------|--------|----------------------|
| <15                         | -                     | -                           | 1       | 1       | -      | 2                    |
| 15-24                       | 1 106                 | 13                          | 1 368   | 105     | 910    | 1 535                |
| 25-34                       | 9 160                 | 62                          | 5 530   | 431     | 5 378  | 10 622               |
| 35-44                       | 2 938                 | 13                          | 2 444   | 131     | 2 347  | 4 617                |
| 45+                         | 13                    | -                           | 29      | -       | 20     | 44                   |
| Total I alt                 | 13 217                | 88                          | 9 372   | 668     | 8 655  | 16 820               |
| <i>Per 1 000 deliveries</i> |                       |                             |         |         |        |                      |
| <i>Pr. 1 000 fødsler</i>    |                       |                             |         |         |        |                      |
| 15-24                       | 150                   | 87                          | 123     | 110     | 100    | 113                  |
| 25-34                       | 199                   | 139                         | 157     | 170     | 144    | 158                  |
| 35-44                       | 262                   | 100                         | 220     | 191     | 245    | 228                  |
| 45+                         | 277                   | -                           | 278     | -       | 435    | 444                  |
| Total I alt                 | 205                   | 121                         | 163     | 160     | 154    | 167                  |

1 Rates are per 1 000 live births.

1 Rater er pr. 1 000 levendefødte.

2 Average 2000-2004. Rates are per 1 000 live births.

2 Gennemsnit for årene 2000-2004. Rater er pr. 1 000 levendefødte.

NCSP codes covered: MCA.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.5.18 Hip replacement by sex and age 2004**  
Hofteledplastik fordelt på køn og alder 2004

| Age Alder                           | Denmark |       | Faroe Islands <sup>1)</sup> |       | Finland |       | Iceland |       | Norway |       | Sweden |        |
|-------------------------------------|---------|-------|-----------------------------|-------|---------|-------|---------|-------|--------|-------|--------|--------|
|                                     | M       | W     | M                           | W     | M       | W     | M       | W     | M      | W     | M      | W      |
| <25                                 | 7       | 12    | -                           | -     | 8       | 5     | -       | -     | 12     | 10    | 9      | 12     |
| 25-44                               | 140     | 99    | 3                           | 1     | 139     | 138   | 8       | 4     | 84     | 112   | 177    | 185    |
| 45-64                               | 1 242   | 1 250 | 8                           | 10    | 1 314   | 1 256 | 52      | 70    | 655    | 1 183 | 2 027  | 2 328  |
| 65-74                               | 1 219   | 1 821 | 11                          | 11    | 672     | 1 677 | 48      | 94    | 763    | 1 696 | 2 120  | 3 077  |
| 75+                                 | 1 294   | 3 239 | 7                           | 20    | 1 114   | 2 955 | 51      | 123   | 1 076  | 3 232 | 2 630  | 6 059  |
| Total I alt                         | 3 902   | 6 421 | 29                          | 42    | 3 247   | 6 031 | 159     | 291   | 2 590  | 6 233 | 6 963  | 11 661 |
| <i>Per 100 000 in the age group</i> |         |       |                             |       |         |       |         |       |        |       |        |        |
| <i>Pr. 100 000 i alderen</i>        |         |       |                             |       |         |       |         |       |        |       |        |        |
| 25-44                               | 18      | 13    | 43                          | 17    | 20      | 20    | 19      | 10    | 13     | 17    | 14     | 16     |
| 45-64                               | 173     | 175   | 134                         | 189   | 181     | 172   | 157     | 219   | 115    | 212   | 172    | 200    |
| 65-74                               | 602     | 802   | 651                         | 682   | 333     | 683   | 546     | 989   | 503    | 991   | 595    | 779    |
| 75+                                 | 909     | 1 365 | 570                         | 1 068 | 899     | 1 180 | 759     | 1 325 | 813    | 1 463 | 850    | 1 245  |
| Total I alt                         | 146     | 235   | 116                         | 181   | 127     | 226   | 108     | 199   | 114    | 269   | 156    | 257    |

1 Average 2000-2004.

1 Gennemsnit for årene 2000-2004.

NCSP codes covered: NFB; NFC.

Sources: See Table 3.5.1

Kilder: Se tabel 3.5.1

### 3.6 Accidents and self-inflicted injury

Patients admitted to hospital because of accidents occupy a substantial part of the capacity in hospitals.

While statistics on causes of death are highly developed in the Nordic countries, registration of survivors following accidents is still incomplete, and the available data are difficult to compare. Since only Denmark and Iceland have comparable statistics on external causes of accidents, it is not possible to present Nordic statistics on this.

Therefore statistics are presented for hospital discharges for the most common "serious" accidents that usually require admission. The statistics show marked differences, both between countries and for men and women.

### 3.6 Ulykker og villet egenskade

Patienter indlagt på grund af ulykker udnytter en væsentlig del af kapaciteten ved sygehusene.

Mens statistikken over dødsårsager er veludbygget i de nordiske lande, er registreringen af overlevende efter ulykker stadigvæk mangelfuld, og de tilgængelige data er vanskelige at sammenligne. Da kun Danmark og Island har sammenlignelig statistik for de ydre årsager ved ulykker er det ikke muligt at bringe nordisk statistik vedrørende dette.

Det er derfor valgt at medtage statistik over udskrivelser for de mest almindelige "større" ulykker som oftest vil kræve indlæggelse. Her ser man markante forskelle, både mellem landene og mænd og kvinder.

**Table 3.6.1 Discharges after treatment for injuries per 100 000 inhabitants by sex 2004<sup>1)</sup>**

Udskrivninger fra sygehuse efter behandling for skader per 100 000 indbygger og efter køn 2004<sup>1)</sup>

|                                                                                                          | Denmark |     | Faroe Islands <sup>2)</sup> |     | Greenland |     | Finland |     | Åland <sup>2)</sup> |     | Iceland |     | Norway |     | Sweden |     |
|----------------------------------------------------------------------------------------------------------|---------|-----|-----------------------------|-----|-----------|-----|---------|-----|---------------------|-----|---------|-----|--------|-----|--------|-----|
|                                                                                                          | M       | W   | M                           | W   | M         | W   | M       | W   | M                   | W   | M       | W   | M      | W   | M      | W   |
| <i>Fracture of skull and intracranial injury</i><br>Kraniebrud og intrakraniel læsion<br>ICD10: S02; S06 | 281     | 161 | 368                         | 160 | 243       | 132 | 273     | 136 | 146                 | 90  | 147     | 71  | 283    | 157 | 263    | 173 |
| <i>Fracture at wrist and hand level</i><br>Brud i handled og hand ICD10: S62                             | 59      | 21  | 60                          | 26  | 28        | 7   | 53      | 17  | 17                  | 9   | 46      | 6   | 53     | 18  | 23     | 10  |
| <i>Superficial injury of lower leg</i><br>Læsion af knæ og underben<br>ICD10: S80-S89                    | 270     | 217 | 515                         | 287 | 234       | 225 | 519     | 379 | 205                 | 159 | 134     | 145 | 232    | 198 | 152    | 159 |
| <i>Superficial injury of hip and thigh</i><br>Læsion af hofte og lår<br>ICD10: S70-S79                   | 171     | 353 | 158                         | 334 | 102       | 153 | 220     | 423 | 94                  | 194 | 116     | 227 | 185    | 404 | 197    | 398 |
| <i>Poisoning</i><br>Forgiftning<br>ICD10: T36-T65                                                        | 178     | 237 | 66                          | 81  | 97        | 113 | 95      | 113 | 26                  | 34  | 36      | 56  | 113    | 155 | 81     | 135 |
| <i>Burn and corrosion</i><br>Forbrænding og ætsning<br>ICD10: T20-T32                                    | 18      | 11  | 22                          | 9   | 18        | 16  | 44      | 17  | 15                  | 5   | 29      | 12  | 36     | 16  | 21     | 10  |

1 Including violence and self-inflicted injury.

2 Average 1999-2003.

1 Inklusiv vold og villet egenskade.

2 Gennemsnit for årene 1999-2003.

Source: *The Inpatient Registers of the Nordic Countries*

Kilde: Patientregistre i de nordiske lande

**Table 3.6.2 Discharges after treatment for injuries, per 100 000 inhabitants, by sex and age 2004<sup>1)</sup>**

Udskrivninger fra sygehuse efter behandling for skader, pr. 100 000 indbyggere efter køn og alder 2004<sup>1)</sup>

|                    | <i>Denmark</i> |       | <i>Finland</i> |       | <i>Iceland</i> |       | <i>Norway</i> |       | <i>Sweden</i> |       |
|--------------------|----------------|-------|----------------|-------|----------------|-------|---------------|-------|---------------|-------|
| <i>Age Alder</i>   | M              | W     | M              | W     | M              | W     | M             | W     | M             | W     |
| 0-14               | 679            | 465   | 1 084          | 699   | 669            | 413   | 1 207         | 805   | 1 219         | 847   |
| 15-24              | 1 028          | 433   | 2 399          | 981   | 1 037          | 394   | 2 335         | 1 404 | 1 450         | 787   |
| 25-64              | 680            | 412   | 2 336          | 1 390 | 672            | 435   | 1 685         | 1 201 | 1 222         | 898   |
| 65+                | 1 279          | 2 352 | 4 571          | 5 603 | 1 677          | 2 843 | 3 427         | 5 295 | 4 242         | 5 561 |
| <i>Total I alt</i> | 797            | 754   | 2 400          | 2 008 | 832            | 734   | 1 886         | 1 842 | 1 701         | 1 783 |

1 Including violence and self-inflicted injury.

1 Inklusiv vold og villet egenskab.

Sources: *The Inpatient Registers of the Nordic Countries* ICD-10: S00-T98

Kilde: Patientregistrene i de nordiske lande

### 3.7 Development in consumption of medicinal products

Table 3.7.1: presents total sales of medicinal products in the Nordic countries, by ATC main group. Sales of medicinal products are highest in Sweden, then Finland and Norway, while Denmark and Iceland have slightly lower sales. Sales in the Faroe Islands are slightly lower than in Iceland, while sales in Greenland are substantially lower than in the other countries.

### 3.7 Udvikling i lægemiddelforbrug

I tabell 3.7.1: ses det samlede lægemiddelforbrug i de nordiske lande fordelt på ATC-hovedgrupper. Forbruget af lægemidler er højest i Sverige, dernæst kommer Finland og Norge, mens Danmark og Island har et lidt lavere forbrug. Åland er stort set på højde med Finland. Forbruget på Færøerne er lidt lavere end i Island, mens forbruget i Grønland er markant lavere end i de øvrige lande.

### Antacids and medicines for treatment of peptic ulcer

Table 3.7.2.: The sales of the ATC group A02 have since 1995 steadily increasing because of increasing use of proton pump inhibitors (A02BC), which outweighs the decreasing consumption of antacids (A02A) and histamine H<sub>2</sub>-receptor antagonists (A02BA). Since the late nineties, proton pump inhibitors have been the largest group of drugs used for peptic ulcer in all countries. In Iceland proton pump inhibitors are used about twice as often as in Denmark, Finland and Norway.

### Syrhämmande medel och medel mot magsår

Tabell 3.7.2: Försäljningen av läkemedel i ATC-gruppen A02 er siden 1995 steget i alla länder. Detta beror på ökad användning av protonpumpshämmare (A02BC), vilket kompenserar den minskande konsumtionen av syrahämmande medel (A02A) och histamin-H<sub>2</sub>-receptorantagonister (A02BA). Sedan slutet av nittioalet har protonpumpshämmare varit den största behandlingsgruppen för magsår i alla länder. På Island används protonpumpshämmare ungefär dubbelt så mycket som i Danmark, Finland och Norge.

### *Anti-obesity medicines*

Table 3.7.3: Consumption and expenditure for this group was expected to rise rapidly when marketing authorizations were granted to new antiobesity agents: orlistat (A08AB01) that prevents fat absorption from the gut, and centrally acting sibutramine (A08A A10). However, this did not happen.

### *Medel mot övervikt*

Tabell 3.7.3: Användningen av och kostnaderna för medel mot övervikt väntades stiga snabbt när nya medel beviljades försäljningstillstånd: örlistat (A08AB01), som hindrar fettupptagning i tarmen, och det centralt verkande sibutramin (A08AA10). Detta hände dock aldrig.

### *Medicines used for the treatment of diabetes*

Table 3.7.4: The incidence of both types of diabetes, type 1 and type 2, is increasing. In Western countries the prevalence of diabetes is 2-4 per cent of the population. The incidence rises with age; in Finland every tenth of those over 70 years old has diabetes. With an increasing share of elderly in the population, the number of diabetics and consumption of these medicines will rise.

Type 2 diabetics have a reduced sensitivity to insulin in their tissues, and the disease is associated with increased incidence of obesity. One reason for the increasing incidence may simply be the increased awareness and improved diagnosis of the disease.

Type 1 diabetics are treated with insulin (A10A), and as a main rule type 2 diabetics are treated with oral blood glucose lowering agents (A10B). In mild cases of type 2 diabetes a change of diet is sufficient. If the blood glucose (or glucose haemoglobin, HbA1C) is very high, the use of insulin is recommended in addition to changing the diet and taking oral blood glucose lowering agents.

### *Inhibitors of platelet aggregation*

Table 3.7.5: The use of platelet aggregation inhibitors (ATC group B01AC), especially acetylsalicylic acid, is steadily increasing in all Nordic countries. Consumption is highest in Finland where almost 10 per cent of the population uses this prophylactic medication against stroke or cardiac infarction.

### *Diabetesmedel*

Tabell 3.7.4: Förekomsten av bägge typer-na av diabetes, typ 1 och 2, ökar. I västliga länder har cirka 2-4 procent av befolkningen diabetes. Förekomsten ökar med åldern: i Finland har varje tionde person över 70 diabetes. När andelen äldre människor ökar i befolkningen, kommer också antalet människor med diabetes att öka, liksom läkemedelsförbrukningen.

Hos en patient med typ 2-diabetes har vävnaderna en minskad känslighet för insulin. Övervikt ökar risken för sjukdomen. En orsak till den ökande förekomsten kan helt enkelt vara större medvetenhet och förbättrad diagnos.

Typ 1-diabetes behandlas med insulin (A10A), och enligt huvudregeln behandlas typ 2-diabetes med blodsockersänkande tabletter (A10B). I milda fall av typ-2-diabetes räcker det med ändrade kostvanor. Om blodsockret (eller HbA1C) är mycket högt, rekommenderas användning av insulin i kombination med ändrade kostvanor och blodsockersänkande medel.

### *Aggregationshämmande läkemedel*

Tabell 3.7.5: Användningen av trombocytaggregationshämmande läkemedel, särskilt acetylsalicylsyra, ökar stadigt i alla de nordiska länderna. Förbrukningen är störst i Finland, där nästan tio procent av befolkningen använder denna förebyggande behandling mot stroke eller hjärtinfarkt.

*Cardiovascular medicines*

Tables 3.7.6 and 3.7.7: The total consumption of cardiovascular agents (excluding C04, peripheral vasodilators and C05, vasoprotectives) is largely at the same level in all the Nordic countries, but slightly lower in Iceland. In all countries the consumption of these agents is growing, in particular due to increased consumption of agents acting on the renin-angiotensin system (C09) and serum lipid reducing agents (C10).

In all the Nordic countries the group cardiac therapy (C01) constitutes a minor part of the total consumption of cardiovascular agents. Sweden and Finland have a higher consumption in this group than the other countries. The dominating substances in the group C01 are the vasodilating nitrate preparations used in ischemic heart disease (C01D), followed by cardiac glycosides (C01A) used in heart failure. The consumption of both groups is decreasing in all countries, except in Iceland where the use of cardiac glycosides has been rather stable. Due to the general increase in the total consumption of cardiovascular agents, the relative share of cardiac medication (C01) in group C is steadily falling.

During the past two decades important progress has been made in the diagnosis and treatment of cardiovascular diseases. The interest, as well as the possibilities for preventive measures is increasing, and hypertension is increasingly recognized not only as a disease but as a risk factor. In the eighties ACE inhibitors (C09) and calcium channel blockers

*Medel mot hjärt- och kärlsjukdomar*

Tabell 3.7.6 och 3.7.7: Den totala förbrukningen av medel mot hjärt- och kärlsjukdomar (förutom C04, kärlvidgande medel, och C05, kärlskyddande medel) är i stort sett på samma nivå i alla de nordiska länderna, med undantag av Island, där den är något lägre. I alla länderna ökar förbrukningen av dessa medel, särskilt på grund av att förbrukningen av medel som påverkar renin-angiotensinsystemet (som deltar i regleringen av blodtrycket) (C09) och lipid-sänkande medel (C10) ökar

I alla de nordiska länderna utgör gruppen hjärtläkemedel (C01) endast en liten del av den totala förbrukningen av medel mot hjärt- och kärlsjukdomar. Sverige och Finland har en större förbrukning av denna grupp än de andra länderna. Den dominerande substansen i gruppen hjärtläkemedel är kärlvidgande medel mot ischemisk hjärtsjukdom (C01D), följd av hjärtglykosider (C01A) mot hjärtsvikt. Förbrukningen i båda grupperna minskar lika mycket i alla länder utom på Island, där användningen av hjärtglykosider har varit relativt stabil. Eftersom förbrukningen av medel mot hjärt- och kärlsjukdomar har ökat rent allmänt, blir den relativa andelen av hjärtläkemedel i grupp C allt mindre.

De två senaste decennierna har diagnostiken och behandlingen av hjärt- och kärlsjukdomar gått framåt avsevärt. Intresset för och möjligheterna att vidta förebyggande åtgärder i tidiga stadier av sjukdomen ökar, och högt blodtryck erkänns i allt högre grad som en riskfaktor. På åttiotalet marknadsfördes ACE-hämmare (C09) och kalciumantagonister

(C08) were marketed as alternatives to the conventional anti-hypertensive agents (C02 and C03). Currently they are also used in the treatment of heart failure and in the secondary prophylaxis of myocardial infarction. Recent data has further strengthened the widespread use of these agents in patients suffering from cardiovascular diseases with risk factors such as diabetes.

The use of angiotensin II antagonists in combination with diuretics (C09D) was low in 1995 but a very rapid increase took place especially in 2003 and 2004. The highest consumption of this combination is seen in Norway.

(C08) som alternativ till de konventionella medlen mot högt blodtryck (C02 och C03). I dag används de också vid behandling av hjärtsvikt och vid sekundärprofylax efter hjärtinfarkt. Nya forskningsresultat har ytterligare befast den utbredda användningen av dessa medel för behandling av patienter med hjärtsjukdom tillsammans med andra riskfaktorer som diabetes.

Användningen av AT-II-antagonister i kombination med diuretika (C09D) var obetydlig 1995 men ökade mycket snabbt, speciellt mellan 2003 och 2004. Den största förbrukningen av denna kombination finner man i Norge.

### *Lipid modifying agents*

Table 3.7.8: The wide and rapidly growing use of lipid modifying agents, especially HMG CoA reductase inhibitors or statins (C10AA), is continuing in all the Nordic countries. One reason for the widespread use is the growing awareness that active treatment of hypercholesterolemia clearly decreases the risk of coronary heart disease and death. Consumption may still increase since there are studies indicating that statins decrease the risk of cardiac infarction and stroke also by mechanisms not related to lowering the cholesterol level, including an anti-inflammatory effect on the blood vessel endothelium.

Recommendations for treatment of hyperlipidemia have also changed; the cholesterol levels where drug treatment should be initiated have been lowered during the past years.

### *Lipid modifierande medel (ATC-grupp C10)*

Tabell 3.7.8: Den snabbt och kraftigt ökade förbrukningen av lipidsänkande medel, särskilt statiner (C10AA), fortsätter öka i alla de nordiska länderna. En orsak till den omfattande förbrukningen är den ökande insikten om att aktiv behandling av hyperkolesterolemi (för hög kolesterolhalt i blodet) klart minskar risken för hjärtsjukdom och död. Förbrukningen kan fortfarande öka eftersom man har visat att statiner minskar risken för hjärtinfarkt och stroke genom mekanismer, som inte har med sänkning av kolesterolnivån att göra, t.ex. anti-inflammatorisk effekt på blodkärlens endotel.

Rekommendationerna för behandling av höga blodfetter har också ändrats på senare år. De kolesterolnivåer då läkemedelsbehandling rekommenderas har sänkts.

Iceland and Norway do not reimburse the serum lipid modifying agents unless certain treatment criteria are met, but the result is the same as in other countries, i.e. most patients are indeed reimbursed their costs. The other Nordic countries fully reimburse these agents.

Island och Norge subventionerar inte serumlipidsänkande medel, om inte vissa betingelser när det gäller behandlingen är uppfyllda, men resultatet blir detsamma som i de andra länderna, dvs. i själva verket får de flesta patienter ersättning för sina utgifter. De andra nordiska länderna ersätter dessa medel fullt ut.

In all countries the other serum modifying agents (fibrates, bile acid sequestrants, and nicotinic acid and derivatives) represent a negligible part of the consumption.

I alla länder är marknadsandelen för de andra lipidsänkande medlen (fibrater, resiner och nikotinsyraderivat) obetydlig.

## Oestrogens and progestogens

Table 3.7.9: In the late nineties, oestrogens were increasingly recommended for women's menopausal complaints and for the prophylaxis of osteoporosis. The marketing of improved formulations of oestrogens and progestogens in combination reinforced this development. In all countries except Denmark the consumption of both oestrogens and oestrogens in combination with progestogens increased. In 1999, oestrogens were among the 10 most sold medicines in terms of DDD in both Finland and Iceland.

The consumption of oestrogens (G03C) alone and in combination with progestogens (G03F) has declined since 1999 in Iceland, Sweden and Norway. In Denmark and Finland the decline has been smaller than in other countries.

## Östrogen och progestogen (syntetiskt progesteron)

Tabell 3.7.9: Under den senare delen av 1990-talet rekommenderades östrogen i allt högre grad för behandling av klimakteriebesvär och för att förebygga ben-skörhet. Marknadsföringen av förbättrade kombinationer av östrogen och progestogen förstärkte denna utveckling. I alla länderna utom Danmark ökade konsumtionen av östrogen och östrogen-progestogen-kombinationer. 1999 var östrogen ett av de tio mest sålda läkemedlen i Finland och på Island, räknat i DDD.

Konsumtionen av östrogen (G03C), ensamt eller i kombination med progestogen (G03F), har minskat sedan 1999 på Island och i Sverige och Norge. I Danmark och Finland var nedgången mindre än i de övriga länderna.

*Medicines used for treatment of erectile dysfunction*

Table 3.7.10: The sales of medicines used to treat erectile dysfunction (G04BE) at least doubled from 1999 to 2004 in all countries. Sales of the new, orally administered medicines are responsible for the increase in the latest years. The first of them, sildenafil still has a major share of the consumption.

The actual consumption of these drugs is difficult to estimate, since an unknown amount of drugs – genuine or fake – for treatment of erectile dysfunction are illegally bought via the Internet.

*Medel mot erektionsstörningar*

Tabell 3.7.10: Försäljningen av läkemedel mot erektionsstörningar (G04BE) har minst fördubblats mellan 1999 och 2004. Försäljningen av nya läkemedel i tablettform är orsaken till ökningen på senare år. Den första av dem, sildenafil, har fortfarande den större marknadsandelen.

Den verkliga konsumtionen av dessa substanser är svår att uppskatta, eftersom en okänd mängd läkemedel – äkta eller förfälskade – köps olagligt via Internet.

*Antibacterial medicines*

Table 3.7.11: During the past years the consumption of antibacterials has been strongly criticised, due to the increasing risks of developing resistance by increasing use, in particular of broad spectrum-antibacterials. In all countries it is generally recommended that the use of antibacterials should be limited, and that narrow spectrum antibacterials should be the first line of treatment.

There is relatively little variation between the Nordic countries in the total sales of antibacterials for systemic use (J01). Finland and Iceland have the largest consumption, followed by Greenland and Norway. Denmark has the lowest consumption. There are minor fluctuations in total sales of antibacterials through the years except in Greenland.

*Antibakteriella medel*

Tabell 3.7.11: På senare år har den omfattande konsumtionen av antibakteriella medel kritiserats starkt på grund av den ökande risken för resistens. Detta gäller framför allt bredspektrumantibakteriella medel, som är verksamma mot många bakteriearter. I alla länder rekommenderar man vanligen att användningen av antibakteriella medel begränsas och att smalspektrum-antibakteriella medel borde användas i första hand.

Det finns relativt små skillnader mellan de nordiska länderna när det gäller den totala försäljningen av antibakteriella medel för systemiskt bruk (J01). Finland och Island har den största konsumtionen, följda av Grönland och Norge, medan Danmark har den minsta. Det finns mindre svängningar i den totala försäljningen av antibakteriella medel genom åren utom på Grönland.

### *Medicines for the treatment of pain Smärtstillande medel*

Table 3.7.12: Paracetamol and non-steroidal anti-inflammatory analgesics (NSAIDs, inhibitors of prostaglandin synthesis) are the most important drugs in the treatment of mild to moderate pain. Opioids are indicated for more severe pain.

Tabell 3.7 12: Paracetamol och icke steroida anti-inflammatoriska smärtstillande medel (NSAID-preparat, som hämmar prostaglandinsyntesen) är de viktigaste läkemedlen för behandling av lindrig till måttlig smärta. Opioider används för svår smärta.

The consumption of non-opioid analgesics, or weak analgesics (N02B, mainly paracetamol but also salicylic acid derivatives) and non-steroidal anti-inflammatory and antirheumatic products (M01A) are considered together. Their consumption pattern varies considerably between the Nordic countries.

Konsumtionen av icke opioida eller svaga smärtstillande medel (N02B, huvudsakligen paracetamol, men också derivat av salicylsyra) och NSAID-preparat (N01A) behandlas gemensamt. Deras konsumtionsmönster är mycket olika i de nordiska länderna.

### *Antipsychotic medicines*

Table 3.7.13: Consumption of antipsychotic medicines (N05A) is fairly stable with a minor increase in all the Nordic countries. However, the costs of antipsychotic treatment are increasing in all countries. This is probably due to the market introduction of a series of relatively new substances, olanzapine (N05AH03), risperidone (N05AX08) and quetiapine (N05AH04). Finland has the highest use of antipsychotic medication.

### *Antipsykotiska medel*

Tabell 3.7.13: Konsumtion av antipsykotiska medel (N05A) är ganska stabil, med en mindre ökning i alla de nordiska länderna. Kostnaderna för behandling av antipsykotiska sjukdomar ökar emellertid i alla länderna. Detta beror förmodligen på att ett flertal relativt nya substanser – olanzapin (N05AH03), risperidon (N05AX08) och quetiapin (N05AH04) – introducerats på marknaden. Finland uppvisar den största användningen av antipsykotiska medel.

### *Anxiolytics, hypnotics, and sedatives*

Tables 3.7.14 and 3.7.15: The benzodiazepines (N05BA) dominate the anxiolytics in all the Nordic countries. Finland

### *Lugnande medel och sömnmedel*

Tabell 3.7.14 och 3.7.15: Bensodiazepinerna (N05BA) dominerar marknaden när det gäller ångestdämpande medel i alla

has the highest use of anxiolytic agents, followed by Iceland.

de nordiska länderna. Finland har den största användningen av ångstdämpande medel, följt av Island.

Classical benzodiazepines have lost their dominant share as sedatives and hypnotics (N05CD) since newer benzodiazepine-like agents (N05CF), especially zopiclone (N05CF01), but also zolpidem (N05CF02) have taken their place as the most consumed hypnotics. They are vigorously marketed as having a weaker addictive potential and fewer side effects than the benzodiazepines. In reality, these differences are very small. In all countries the consumption of these new hypnotics is increasing more than the consumption of benzodiazepines is falling, indicating a small rise in the total consumption of hypnotics in most Nordic countries. The benzodiazepine related agents are more expensive than the benzodiazepines. Accordingly, the shift to the former has markedly increased the cost of hypnotics.

De klassiska bensodiazepinerna tappade sin dominerande position bland lugnande medel och sömnmedel (N05CD) då nya re bensodiazepinliknande substanser (N05CF), speciellt zopiklon (N05CF01) och zolpidem (N05CF02), intog platsen som de mest använda sömnmedlen. De marknadsförs kraftigt som mindre beroendeframkallande medel med färre biverkningar än bensodiazepiner. I verkligheten är skillnaderna väldigt små. I alla länderna ökar konsumtionen av de nya sömnmedlen mer än konsumtionen av bensodiazepinerna minskar, vilket pekar på en liten ökning av den totala konsumtionen av sömnmedel i alla de nordiska länderna utom Sverige och Grönland. De bensodiazepinliknande substanserna är dyrare än bensodiazepiner, så övergången har lett till klart ökade utgifter för sömnmedel.

### *Antidepressants*

Table 3.7.16: The steady increase in the consumption of antidepressants is continuing in all the Nordic countries. Depression may be recognised and “accepted” more easily than earlier, and the threshold for drug treatment has become low. The estimated prevalence of depression is around 6-10 per cent, and single symptoms of depression are far more frequent. Much of the increased consumption of antidepressants is due to the powerful marketing of selective serotonin reuptake inhibitors, the so-called SSRIs. In comparison to older tricyclic antidepressants, these are equally effective but

### *Antidepressiva medel*

Tabell 3.7.16: Konsumtionen av antidepressiva medel ökar stadigt i alla de nordiska länderna. I dag igenkänns och accepteras depression lättare och tidigare, med den konsekvensen att tröskeln för att behandla med läkemedel har sänkts. Man uppskattar att förekomsten av depression är cirka 6–10 procent, och att enskilda symtom på depression är betydligt vanligare. Mycket av den ökade konsumtionen av antidepressiva medel beror på den kraftfulla marknadsföringen av selektiva serotoninåterupptagshämmare, så kallade SSRI-preparat. I jämförelse med äldre tricykliska antidepressiva medel är de lika

have a better safety profile. Another reason for increased use is the introduction of new indications for some antidepressants, including e.g. panic disorder, bulimia and obsessive-compulsive neurosis.

effektiva men säkrare. En annan orsak till ökad användning är att man infört nya indikationer för vissa antidepressiva medel, t.ex. panikångest, bulimi och tvångssyndrom.

In all countries the use of the group of N06AX, other antidepressants, has doubled or trebled in the period 1999-2004. This is due to the marketing of a series of new agents, such as mirtazapine (N06AX11), venlafaxine (N06AX16) and, to a smaller extent, reboxetine (N06AX18).

I alla länderna har användning av gruppen "andra antidepressiva medel" (N06AX) fördubblats eller tredubblats under perioden 1999–2004. Detta beror på lanseringen av en serie nya substanser som mirtazapin (N06AX11), venlafaxin (N06AX16) och, i mindre utsträckning, reboxetin (N06AX18).

### *Medicines for treatment of Alzheimer's disease*

Table 3.7.17: First anti-dementia drugs (N06D) were marketed in the late nineties. These agents – donepezil (N06DA02), rivastigmine (N06DA03) and galantamine (N06DA04) – inhibit acetylcholine esterase in the brain and thus increase central cholinergic activity. Their effect is modest at its best but, since no alternative treatment exists, their use increases slowly but steadily.

The consumption is highest in Finland and lowest in Denmark. In Norway a prescription restriction reduces the number of physicians who are allowed to prescribe anti-dementia medicines. Donepezil dominates the use but the consumption of galantamine increases as well. Memantine (N06DX01), an NMDA-receptor antagonist, is new on the market with a small use in all countries. It may increase its share of the market since it is the only Alzheimer drug that is indicated also for more severe forms of the disease.

### *Medel mot demens*

Tabell 3.7 17: Det första läkemedlet mot Alzheimers sjukdom (N06D) introducerades i slutet av nittiotalet. Dessa substanser – donepezil (N06DA02), rivastigmin (N06DA03) och galantamin (N06DA04) – hämmar enzymet acetylkolinesteras i hjärnan och ökar på så vis den centrala kolinerga aktiviteten (stimulering av nervimpulser i hjärnan). Deras effekt är blygsam som bäst, men eftersom inga andra behandlingar finns, ökar förbrukningen sakta men säkert.

Konsumtionen är störst i Finland och minst i Danmark där dessa medel inte subventioneras. I Norge får endast vissa specialister skriva ut medel mot demens. Donepezil är marknadsledande, men även konsumtionen av galantamin ökar. Memantin (N06DX01) är en ny substans som används sparsamt i alla länderna. Det kan öka sin marknadsandel eftersom det är det enda Alzheimermedlet med indikation även för allvarligare stadier av sjukdomen.

***Medicines used in nicotine dependence***

Table 3.7.18: Nicotine in various pharmaceutical formulations (ATC-group N07BA) is used to alleviate withdrawal symptoms and to help in smoking cessation. In all Nordic countries except Finland it belongs to the ten best selling substances calculated in terms of pharmacy retail prices, being on top of the list in Iceland where the consumption is about three times higher than in the other countries.

Bupropion (N07BA02), originally an antidepressant but introduced in 2000 to help smoking cessation, has a small and in most countries declining use.

Another nicotine containing product, snuff, is widely used in Sweden. Although not a medicine, it probably is used also to counteract nicotine withdrawal symptoms.

***Medel mot nikotinberoende***

Tabell 3.7.18: Nikotin i olika former (N07BA) används för att lindra abstinenssymtom och underlätta rökstopp. I alla de nordiska länderna utom Finland hör det till de tio mest sålda substanserna, räknat i apotekens detaljhandelspris. I toppen på listan finns Island, där konsumtionen är ungefär den tre gånger så stor som i de andra länderna.

Bupropion (N07BA02), ursprungligen ett antidepressivt medel, används sparsamt och i minskande grad.

En annan produkt som innehåller nikotin – snus – används mycket i Sverige. Även om det inte klassificeras som ett läkemedel, används det sannolikt för att motverka nikotinabstinens.

***Medicines for the treatment of asthma and chronic obstructive pulmonary disease***

Table 3.7.19: Anti-asthmatics are primarily used in the treatment of asthma and chronic obstructive pulmonary disease (COPD). They can be divided into two main groups. Corticosteroids (R03BA) are the basic treatment for management of the lower airway inflammation that is always present in obstructive pulmonary diseases. The other group is bronchodilating medicines, which are used in the treatment and prevention of asthma attacks and chronic obstructive pulmonary disease (COPD). These include beta-2-adrenoreceptor agonists (R03AC), theophyllines (R03DA), and anticholinergics (R03BB).

***Medel mot astma och kronisk obstruktiv lungsjukdom (KOL)***

Tabel 3.7.19: Astmaläkemedel används främst för behandling av astma och kronisk obstruktiv lungsjukdom (KOL). Medlen kan indelas i två huvudgrupper. Kortikosteroider (R03BA) utgör grunden för behandling av inflammationen i de nedre luftvägarna vid KOL. Den andra gruppen består av luftrörsvidgande medel som används för att behandla och förebygga astmaanfall och KOL. Bland dem ingår selektiva beta-2-stimulerande medel (R03AC), teofylliner (R03DA) och antikolinergika (R03BB).

The sale of asthma medicines rose up to the late nineties, possibly reflecting the increasing prevalence of asthma and improved diagnosis.

Konsumtionen av astmamedel har ökat de senaste åren, möjligen på grund av att förekomsten av astma ökat och att diagnostiken förbättrats, men också därför att man använder större doser i behandlingen.

### *Antihistamines*

Table 3.7.20: Sales of antihistamines (R06A) vary a lot between the Nordic countries. Norway has by far the highest sales, sales in other countries being about half, and in Denmark a third, of that in Norway. Cetirizine (R06AE07) is the by far the dominating active entity in all countries.

Low strength antihistamines in small packages are sold over-the-counter in all the Nordic countries, and also outside pharmacies in Denmark. In all countries antihistamine consumption increased through the period 1995–2004.

### *Antihistaminer*

Tabell 3.7. 20: Försäljningen av antihistaminer (R06A) varierar mycket de nordiska länderna emellan. Norge har utan jämförelse den största konsumtionen – användningen i de andra länderna är cirka hälften av Norges konsumtion, i Danmark en tredjedel. Cetirizin (R06AE07) är den helt dominerande substansen i alla länderna.

Svaga antihistaminer i små förpackningar säljs receptfritt i alla de nordiska länderna, och även utanför apoteken i Danmark. I alla länderna har förbrukningen av antihistaminer ökat under perioden 1995–2004.

**Table 3.7.1 Sales of medicinal products in total, DDD/1 000 inhabitants/day by ATC-group, 2004**

Salg af lægemidler-i alt i DDD/1 000 indbyggere/døgn fordelt på ATC-grupper 2004

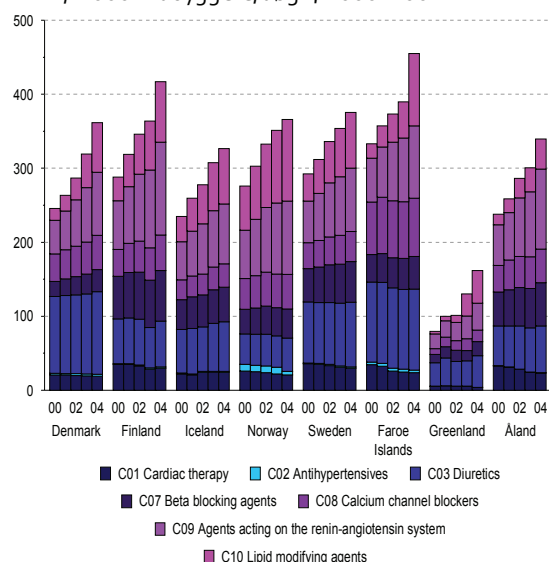
|                                                                          | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|--------------------------------------------------------------------------|---------|---------------|-----------|---------|-------|---------|--------|--------|
| <i>A Alimentary tract and metabolism</i>                                 |         |               |           |         |       |         |        |        |
| Fordøjelse og stofskifte                                                 | 131     | 124           | 53        | 182     | 159   | 112     | 192    | 208    |
| <i>B Blood and blood-forming organs</i>                                  |         |               |           |         |       |         |        |        |
| Blod og bloddannende organer                                             | 81      | 68            | 29        | 134     | 147   | 88      | 108    | 287    |
| <i>C Cardiovascular system</i>                                           |         |               |           |         |       |         |        |        |
| Hjerte og kredsløb                                                       | 362     | 419           | 163       | 418     | 346   | 348     | 367    | 375    |
| <i>G Genito-urinary system and sex hormones</i>                          |         |               |           |         |       |         |        |        |
| Kønshormoner m.m.                                                        | 102     | 84            | 65        | 125     | 114   | 141     | 98     | 109    |
| <i>H Systemic hormonal preparations, excl. sex hormones and insulins</i> |         |               |           |         |       |         |        |        |
| Hormoner til systemisk brug                                              | 27      | 25            | 10        | 37      | 47    | 30      | 37     | 39     |
| <i>J Anti-infectives for systemic use</i>                                |         |               |           |         |       |         |        |        |
| Infektionssygdomme                                                       | 18      | 18            | 21        | 22      | 22    | 24      | 18     | 18     |
| <i>L Antineoplastic and immunomodulating agents</i>                      |         |               |           |         |       |         |        |        |
| Cancermidler m.m.                                                        | 9       | 6             | 3         | 10      | 13    | 10      | 10     | 9      |
| <i>M Musculo-skeletal system</i>                                         |         |               |           |         |       |         |        |        |
| Muskler, led og knogler                                                  | 66      | 41            | 23        | 93      | 66    | 79      | 65     | 64     |
| <i>N Nervous system</i>                                                  |         |               |           |         |       |         |        |        |
| Nervesystemet                                                            | 242     | 177           | 106       | 220     | 158   | 297     | 195    | 239    |
| <i>P Antiparasitic products, insecticides and repellents</i>             |         |               |           |         |       |         |        |        |
| Parasitmidler                                                            | 1       | 1             | 3         | 1       | 2     | 1       | 1      | 1      |
| <i>R Respiratory system</i>                                              |         |               |           |         |       |         |        |        |
| Åndedrætsorganer                                                         | 116     | 89            | 55        | 116     | 11    | 109     | 163    | 140    |
| <i>S Sensory organs</i>                                                  |         |               |           |         |       |         |        |        |
| Sanseorganer                                                             | 9       | 7             | 12        | 14      | 15    | 11      | 17     | 17     |
| <i>Total</i>                                                             |         |               |           |         |       |         |        |        |
| I alt                                                                    | 1 164   | 1 059         | 543       | 1 373   | 1 201 | 1 251   | 1 272  | 1 854  |

Sources: D: Danish Medicines Agency; FI: Chief Pharmaceutical Officer; G: The Central Pharmacy in Copenhagen County; F & Å: National Agency for Medicines; I: Ministry of Health and Social Security; N: Norwegian Institute of Public Health; S: National Corporation of Swedish Pharmacies

Note: Sales of B05 and D are excluded from this table because no official DDDs are assigned in these groups. A11 is excluded because of differences in the definitions of medicinal and non-medicinal products.

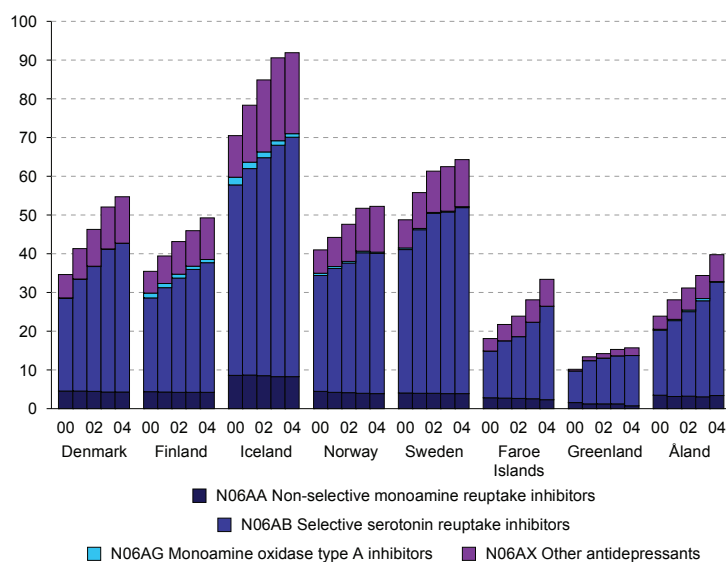
**Figure 3.7.1 Sales of medicinal products for the cardiovascular system (ATC-group C), DDD/1 000 inhabitants/day, 2000-2004**

Salg af medicinal produkter til hjerte og kredsløb (ATC-gruppe C),  
DDD/1 000 indbyggere/døgn, 2000-2004



**Figure 3.7.2 Sales of antidepressants (ATC-Group N06A), DDD/1 000 inhabitants/day 2000-2004**

Salg af antidepressiver (ATC-gruppe N06A),  
DDD/1 000 indbyggere/døgn 2000-2004



**Table 3.7.2 Sales of drugs for gastric acid related disorders (ATC-group A02),  
DDD/1 000 inhabitants/day 1995-2004  
Salg af midler mod mavesyre-relaterede lidelser (ATC-gruppe A02),  
DDD/ 1 000 indbyggere/døgn 1995-2004**

|                                                                                    | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------------------------------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| <b>A02</b>                                                                         |         |                  |           |         |       |         |        |        |
| <i>Drugs for gastric acid<br/>related disorders</i>                                |         |                  |           |         |       |         |        |        |
| Midler mod mavesyre-<br>relaterede forstyrrelser                                   |         |                  |           |         |       |         |        |        |
| 1995                                                                               | 29.1    | 17.1             | ..        | 16.2    | ..    | 24.9    | 19.4   | 26.7   |
| 2000                                                                               | 28.1    | 27.4             | 14.8      | 19.7    | 22.1  | 39.0    | 24.7   | 38.4   |
| 2003                                                                               | 37.4    | 39.3             | 20.5      | 30.9    | 31.1  | 49.5    | 34.1   | 40.4   |
| 2004                                                                               | 35.8    | 36.4             | 16.7      | 29.9    | 30.0  | 52.0    | 30.5   | 40.2   |
| <b>A02A</b>                                                                        |         |                  |           |         |       |         |        |        |
| <i>Antacids</i>                                                                    |         |                  |           |         |       |         |        |        |
| Syreneutraliserende midler                                                         |         |                  |           |         |       |         |        |        |
| 1995                                                                               | 8.7     | 6.6              | ..        | 3.3     | ..    | 2.9     | 4.9    | 4.7    |
| 2000                                                                               | 7.5     | 5.4              | 1.7       | 2.8     | 3.7   | 2.6     | 3.3    | 3.1    |
| 2003                                                                               | 7.4     | 4.7              | 1.5       | 2.6     | 2.8   | 2.5     | 2.5    | 2.6    |
| 2004                                                                               | 7.2     | 4.4              | 1.8       | 2.6     | 2.8   | 2.4     | 2.3    | 2.7    |
| <b>A02B</b>                                                                        |         |                  |           |         |       |         |        |        |
| <i>Drugs for peptic ulcer<br/>and gastro-oesophageal<br/>reflux disease (GORD)</i> |         |                  |           |         |       |         |        |        |
| Midler mod ulcus (mavesår)<br>og gastroøsofagal refluks                            |         |                  |           |         |       |         |        |        |
| 1995                                                                               | 12.1    | 9.1              | ..        | 9.6     | ..    | 22.1    | 11.3   | 21.8   |
| 2000                                                                               | 20.6    | 22.0             | 12.3      | 17.0    | 18.5  | 36.4    | 21.4   | 35.3   |
| 2003                                                                               | 30.0    | 34.6             | 18.3      | 28.3    | 28.3  | 47.0    | 31.6   | 37.8   |
| 2004                                                                               | 28.6    | 32.0             | 14.9      | 27.3    | 27.2  | 49.6    | 28.2   | 37.5   |
| <b>A02BA</b>                                                                       |         |                  |           |         |       |         |        |        |
| <i>H2-receptor antagonists</i>                                                     |         |                  |           |         |       |         |        |        |
| H2-receptor antagonist                                                             |         |                  |           |         |       |         |        |        |
| 1995                                                                               | 7.0     | 4.5              | ..        | 4.6     | ..    | 14.2    | 6.7    | 7.0    |
| 2000                                                                               | 6.5     | 3.8              | 2.5       | 5.1     | 6.2   | 9.6     | 5.9    | 7.1    |
| 2003                                                                               | 6.0     | 3.6              | 1.1       | 4.1     | 5.0   | 7.7     | 5.6    | 5.3    |
| 2004                                                                               | 6.4     | 3.7              | 0.6       | 3.9     | 4.8   | 7.2     | 5.5    | 5.2    |
| <b>A02BC</b>                                                                       |         |                  |           |         |       |         |        |        |
| <i>Proton pump inhibitors</i>                                                      |         |                  |           |         |       |         |        |        |
| Protonpumpe hæmmere                                                                |         |                  |           |         |       |         |        |        |
| 1995                                                                               | 4.8     | 4.5              | ..        | 2.6     | ..    | 7.6     | 4.5    | 12.5   |
| 2000                                                                               | 13.4    | 16.9             | 9.5       | 9.8     | 9.3   | 26.6    | 14.9   | 26.8   |
| 2003                                                                               | 23.4    | 30.0             | 16.8      | 22.5    | 21.4  | 39.2    | 25.5   | 31.3   |
| 2004                                                                               | 21.6    | 27.2             | 14.1      | 21.9    | 20.5  | 42.3    | 22.2   | 31.1   |

The table continues ...

## MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.7.2 continued**

|                                                                                          | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------------------------------------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| A02BX                                                                                    |         |                  |           |         |       |         |        |        |
| <i>Other drugs for peptic ulcer<br/>and gastro-oesophageal<br/>reflux disease (GORD)</i> |         |                  |           |         |       |         |        |        |
| Andre midler mod mavesår<br>og gastroøsofagal reflux                                     |         |                  |           |         |       |         |        |        |
| 1995                                                                                     | 0.2     | 0.2              | ..        | 2.3     | ..    | 0.3     | 0.1    | 2.0    |
| 2000                                                                                     | 0.7     | 1.3              | 0.3       | 1.9     | 2.9   | 0.1     | 0.5    | 1.3    |
| 2003                                                                                     | 0.6     | 1.1              | 0.3       | 1.6     | 1.8   | 0.0     | 0.4    | 1.1    |
| 2004                                                                                     | 0.5     | 1.1              | 0.2       | 1.5     | 1.8   | 0.0     | 0.4    | 1.1    |

**Table 3.7.3 Sales of antiobesity preparations, excl. dietary products  
(ATC-group A08), DDD/1 000 inhabitants/day 1995-2004**

Salg af midler mod fedme (ATC-gruppe A08),  
DDD/1 000 indbyggere/døgn 1995-2004

|                                                             | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| A08                                                         |         |                  |           |         |       |         |        |        |
| <i>Antiobesity preparations,<br/>excl. dietary products</i> |         |                  |           |         |       |         |        |        |
| Midler mod fedme ekskl.<br>slankepulvere                    |         |                  |           |         |       |         |        |        |
| 1995                                                        | 6.2     | 2.9              | ..        | 0.1     | ..    | 0.0     | 0.0    | 0.0    |
| 2000                                                        | 4.9     | 3.3              | 0.6       | 0.6     | 0.6   | 1.2     | 1.1    | 4.0    |
| 2003                                                        | 0.5     | 0.5              | 0.0       | 0.4     | 0.4   | 1.5     | 1.9    | 1.4    |
| 2004                                                        | 0.6     | 0.4              | 0.0       | 0.5     | 0.2   | 1.4     | 2.6    | 2.2    |

**Table 3.7.4 Sales of drugs used in diabetes (ATC-group A10),  
DDD/1 000 inhabitants/day 1995-2004**

Salg af diabetesmidler (ATC-gruppe A10), DDD/1 000 indbyggere/døgn 1995-2004

|                               | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| A10                           |         |                  |           |         |       |         |        |        |
| <i>Drugs used in diabetes</i> |         |                  |           |         |       |         |        |        |
| Midler ved diabetes           |         |                  |           |         |       |         |        |        |
| 1995                          | 14.6    | 16.0             | ..        | 30.8    | ..    | 9.9     | 18.0   | 28.8   |
| 2000                          | 22.0    | 23.0             | 6.1       | 42.6    | 25.3  | 15.3    | 27.0   | 37.0   |
| 2003                          | 28.6    | 23.7             | 9.0       | 58.0    | 32.4  | 21.1    | 33.7   | 42.2   |
| 2004                          | 31.3    | 24.7             | 10.0      | 64.4    | 36.6  | 22.2    | 33.7   | 43.6   |
| A10A                          |         |                  |           |         |       |         |        |        |
| <i>Insulins and analogues</i> |         |                  |           |         |       |         |        |        |
| Insulin                       |         |                  |           |         |       |         |        |        |
| 1995                          | 6.7     | 5.7              | 1.1       | 11.8    | ..    | 3.4     | 10.9   | 15.0   |
| 2000                          | 9.4     | 8.1              | 1.8       | 15.9    | 11.8  | 5.0     | 14.3   | 19.6   |
| 2003                          | 11.3    | 9.6              | 2.4       | 20.2    | 12.9  | 5.9     | 16.5   | 21.7   |
| 2004                          | 12.2    | 10.2             | 2.6       | 20.9    | 15.0  | 5.9     | 16.5   | 22.3   |

The table continues ...

Table 3.7.4 continued

|                                                       | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| A10B                                                  |         |                  |           |         |       |         |        |        |
| <i>Oral blood glucose<br/>lowering drugs</i>          |         |                  |           |         |       |         |        |        |
| Blodglukose sænkende mid-<br>ler til oralt brug       |         |                  |           |         |       |         |        |        |
| 1995                                                  | 7.9     | 10.3             | 1.7       | 19.0    | ..    | 6.5     | 7.1    | 13.8   |
| 2000                                                  | 12.6    | 14.8             | 4.3       | 26.7    | 13.5  | 10.3    | 12.7   | 17.5   |
| 2003                                                  | 17.2    | 14.2             | 6.5       | 37.8    | 19.5  | 15.2    | 17.2   | 20.5   |
| 2004                                                  | 19.1    | 14.5             | 7.4       | 41.6    | 21.7  | 16.3    | 19.4   | 21.4   |
| A10BA                                                 |         |                  |           |         |       |         |        |        |
| <i>Biguanides</i>                                     |         |                  |           |         |       |         |        |        |
| Biguanider                                            |         |                  |           |         |       |         |        |        |
| 1995                                                  | 1.3     | 1.2              | ..        | 3.1     | ..    | 2.9     | 0.8    | 2.6    |
| 2000                                                  | 2.8     | 3.1              | 1.0       | 9.3     | 4.2   | 4.7     | 3.7    | 5.5    |
| 2003                                                  | 5.5     | 4.8              | 2.9       | 14.1    | 8.0   | 6.7     | 7.4    | 9.4    |
| 2004                                                  | 6.8     | 5.8              | 3.4       | 16.3    | 9.2   | 7.3     | 8.6    | 10.7   |
| A10BB                                                 |         |                  |           |         |       |         |        |        |
| <i>Sulfonamides, urea<br/>derivatives</i>             |         |                  |           |         |       |         |        |        |
| Sulfonamider, derivater af<br>urea                    |         |                  |           |         |       |         |        |        |
| 1999                                                  | 8.9     | 11.2             | 2.5       | 18.3    | 8.4   | 4.6     | 8.2    | 11.2   |
| 2000                                                  | 9.4     | 11.7             | 3.2       | 17.4    | 9.2   | 5.4     | 8.6    | 11.2   |
| 2003                                                  | 11.1    | 9.2              | 3.7       | 23.4    | 11.4  | 6.7     | 9.4    | 9.3    |
| 2004                                                  | 11.8    | 8.6              | 4.0       | 24.6    | 12.3  | 6.9     | 10.3   | 8.5    |
| A10BG                                                 |         |                  |           |         |       |         |        |        |
| <i>Thiazolinediones</i>                               |         |                  |           |         |       |         |        |        |
| Thiazolindioner                                       |         |                  |           |         |       |         |        |        |
| 1999                                                  | ..      | 0.0              | 0.0       | 0.0     | 0.0   | 0.0     | ..     | 0.0    |
| 2000                                                  | 0.0     | 0.0              | 0.0       | 0.0     | 0.0   | 0.0     | ..     | 0.0    |
| 2003                                                  | 0.1     | 0.1              | 0.0       | 0.2     | 0.1   | 1.4     | 0.1    | 0.7    |
| 2004                                                  | 0.1     | 0.0              | 0.0       | 0.5     | 0.1   | 1.6     | 0.3    | 0.9    |
| A10BX                                                 |         |                  |           |         |       |         |        |        |
| <i>Other oral blood glucose<br/>lowering drugs</i>    |         |                  |           |         |       |         |        |        |
| Andre blodglukose sænken-<br>de midler til oralt brug |         |                  |           |         |       |         |        |        |
| 1999                                                  | 0.2     | 0.0              | 0.0       | 0.0     | 0.0   | 0.0     | 0.0    | 0.2    |
| 2000                                                  | 0.3     | 0.0              | 0.0       | 0.0     | 0.0   | 0.0     | 0.1    | 0.5    |
| 2003                                                  | 0.4     | 0.0              | 0.0       | 0.1     | 0.1   | 0.4     | 0.1    | 1.0    |
| 2004                                                  | 0.3     | 0.0              | 0.0       | 0.1     | 0.1   | 0.4     | 0.1    | 1.1    |

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**

**Tabel 3.7.5 Sales of platelet aggregation inhibitors excl. heparin (ATC/group B01AC), DDD/1 000 inhabitants/day, 1995–2004**

Salg af blodplade-aggregations-hæmmere ekskl. heparin (ATC-gruppe B01AC), DDD/1 000 indbyggere/døgn 1995–2004

|      | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------|---------|---------------|-----------|---------|-------|---------|--------|--------|
| 1995 | 40.6    | 9.5           | 0.2       | 75.6    | 39.2  | 42.2    | 45.4   | 56.0   |
| 2000 | 42.3    | 14.3          | 4.9       | 80.6    | 43.6  | 46.0    | 48.7   | 58.9   |
| 2003 | 51.9    | 33.1          | 20.9      | 96.1    | 57.5  | 54.7    | 59.1   | 69.2   |
| 2004 | 56.8    | 16.5          | 24.6      | 101.6   | 63.9  | 56.3    | 63.3   | 72.3   |

**Table 3.7.6 Sales of drugs for cardiac therapy (ATC group C01), DDD/1 000 inhabitants/day, 1995–2004**

Salg af lægemidler til hjerteterapi (ATC-gruppe C01), DDD/1 000 indbyggere/døgn 1995–2004

|                                            | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|--------------------------------------------|---------|---------------|-----------|---------|-------|---------|--------|--------|
| C01                                        |         |               |           |         |       |         |        |        |
| <i>Cardiac therapy</i>                     |         |               |           |         |       |         |        |        |
| Hjerteterapi                               |         |               |           |         |       |         |        |        |
| 1995                                       | 20.7    | 38.3          | ..        | 45.5    | ..    | 22.5    | 29.3   | 38.8   |
| 2000                                       | 21.1    | 34.8          | 5.4       | 35.0    | 33.0  | 22.2    | 25.9   | 35.8   |
| 2003                                       | 19.6    | 24.9          | 5.4       | 31.5    | 24.2  | 24.5    | 22.1   | 31.3   |
| 2004                                       | 19.1    | 23.8          | 3.9       | 30.0    | 23.6  | 24.1    | 20.9   | 29.8   |
| C01A                                       |         |               |           |         |       |         |        |        |
| <i>Cardiac glycosides</i>                  |         |               |           |         |       |         |        |        |
| Hjerteglykosider                           |         |               |           |         |       |         |        |        |
| 1995                                       | 9.0     | 13.2          | 2.6       | 15.7    | ..    | 5.8     | 8.3    | 13.0   |
| 2000                                       | 7.9     | 8.8           | 3.2       | 9.7     | 10.2  | 2.0     | 5.8    | 9.3    |
| 2003                                       | 6.6     | 2.2           | 1.7       | 7.2     | 6.2   | 3.4     | 4.6    | 7.2    |
| 2004                                       | 6.3     | 1.9           | 1.2       | 6.6     | 5.9   | 3.2     | 4.4    | 6.5    |
| C01D                                       |         |               |           |         |       |         |        |        |
| Vasodilators used in cardiac diseases      |         |               |           |         |       |         |        |        |
| Midler mod angina pectoris (hjertekramper) |         |               |           |         |       |         |        |        |
| 1995                                       | 10.5    | 24.1          | 1.8       | 26.3    | ..    | 14.5    | 20.1   | 23.7   |
| 2000                                       | 11.3    | 25.1          | 1.7       | 21.9    | 18.1  | 17.5    | 18.9   | 24.4   |
| 2003                                       | 10.8    | 21.2          | 3.2       | 21.4    | 14.8  | 17.9    | 16.0   | 22.6   |
| 2004                                       | 10.7    | 20.3          | 2.3       | 20.5    | 14.5  | 17.6    | 15.0   | 21.8   |

**Table 3.7.7 Sales of antihypertensives, diuretics, beta-blocking agents, calcium channel blockers and ACE inhibitors (ATC-group C02, C03, C07, C08, C09), DDD/1 000 inhabitants/day, 1995-2004**

Salg af midler mod forhøjet blodtryk, diuretika, beta-receptorblokerende midler, calciumantagonister og ACE-hæmmere (ATC-gruppe C02, C03, C07, C08, C09), DDD/1 000 indbyggere/døgn 1995-2004

|                                                              | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|--------------------------------------------------------------|---------|---------------|-----------|---------|-------|---------|--------|--------|
| <b>C02</b>                                                   |         |               |           |         |       |         |        |        |
| <i>Antihypertensives</i>                                     |         |               |           |         |       |         |        |        |
| Midler mod forhøjet blodtryk                                 |         |               |           |         |       |         |        |        |
| 1995                                                         | 1.1     | 2.4           | ..        | 2.2     | ..    | 0.6     | 6.4    | 0.9    |
| 2000                                                         | 1.8     | 3.2           | 0.2       | 1.1     | 0.4   | 1.4     | 9.3    | 1.2    |
| 2003                                                         | 2.5     | 3.8           | 0.1       | 1.5     | 0.3   | 1.2     | 9.0    | 1.8    |
| 2004                                                         | 2.7     | 3.8           | 0.1       | 1.7     | 0.3   | 1.4     | 4.4    | 1.9    |
| <b>C03</b>                                                   |         |               |           |         |       |         |        |        |
| <i>Diuretics</i>                                             |         |               |           |         |       |         |        |        |
| Vanddrivende midler (diuretika)                              |         |               |           |         |       |         |        |        |
| 1995                                                         | 102.0   | 88.8          | 27.4      | 62.6    | ..    | 56.8    | 41.9   | 86.5   |
| 2000                                                         | 103.9   | 108.4         | 31.7      | 60.5    | 53.6  | 58.9    | 41.2   | 82.5   |
| 2003                                                         | 108.3   | 107.8         | 34.6      | 61.6    | 59.7  | 64.9    | 42.4   | 84.7   |
| 2004                                                         | 111.5   | 109.2         | 42.8      | 61.9    | 63.0  | 67.3    | 45.4   | 87.3   |
| <b>C03A</b>                                                  |         |               |           |         |       |         |        |        |
| <i>Low-ceiling diuretics, thiazides</i>                      |         |               |           |         |       |         |        |        |
| Thiazider                                                    |         |               |           |         |       |         |        |        |
| 1995                                                         | 36.8    | 37.6          | ..        | 3.9     | ..    | 7.9     | 2.9    | 9.0    |
| 2000                                                         | 38.6    | 50.7          | 14.3      | 4.1     | 1.2   | 6.9     | 3.1    | 9.9    |
| 2003                                                         | 43.7    | 52.7          | 19.2      | 4.8     | 2.2   | 8.5     | 4.9    | 13.2   |
| 2004                                                         | 47.1    | 53.3          | 24.1      | 5.2     | 3.4   | 8.7     | 7.0    | 16.1   |
| <b>C03C</b>                                                  |         |               |           |         |       |         |        |        |
| <i>High-ceiling diuretics</i>                                |         |               |           |         |       |         |        |        |
| Loop-diuretika                                               |         |               |           |         |       |         |        |        |
| 1995                                                         | 50.5    | 40.9          | ..        | 21.4    | ..    | 20.5    | 29.6   | 57.4   |
| 2000                                                         | 53.2    | 44.1          | 15.7      | 27.1    | 17.1  | 21.9    | 30.8   | 54.9   |
| 2003                                                         | 53.1    | 40.1          | 14.3      | 30.9    | 23.0  | 23.6    | 29.8   | 53.0   |
| 2004                                                         | 53.2    | 40.0          | 17.2      | 32.0    | 22.3  | 24.1    | 30.2   | 52.0   |
| <b>C03E</b>                                                  |         |               |           |         |       |         |        |        |
| <i>Diuretics and potassium-sparing agents in combination</i> |         |               |           |         |       |         |        |        |
| Diuretika i komb. med kaliumsbesparende midler               |         |               |           |         |       |         |        |        |
| 1995                                                         | 10.0    | 2.1           | ..        | 34.1    | ..    | 26.7    | 7.3    | 10.5   |
| 2000                                                         | 7.7     | 1.7           | 0.6       | 26.7    | 33.3  | 27.9    | 6.0    | 10.7   |
| 2003                                                         | 6.8     | 1.2           | 0.2       | 23.1    | 32.0  | 30.8    | 6.0    | 12.1   |
| 2004                                                         | 6.5     | 1.3           | 0.2       | 21.8    | 34.3  | 32.5    | 6.5    | 13.1   |

The table continues ...

Table 3.7.7 continued

|                                                                        | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------------------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| C07                                                                    |         |                  |           |         |       |         |        |        |
| <i>Beta blocking agents</i>                                            |         |                  |           |         |       |         |        |        |
| Beta-receptorblokerende midler                                         |         |                  |           |         |       |         |        |        |
| 1995                                                                   | 15.5    | 31.2             | 7.5       | 43.3    | ..    | 34.3    | 25.6   | 36.7   |
| 2000                                                                   | 20.3    | 37.1             | 11.3      | 57.2    | 45.8  | 40.2    | 33.2   | 45.0   |
| 2003                                                                   | 26.9    | 42.0             | 13.9      | 65.8    | 53.4  | 45.1    | 38.1   | 52.5   |
| 2004                                                                   | 29.9    | 44.1             | 19.0      | 68.1    | 58.3  | 46.4    | 39.4   | 54.7   |
| C07A                                                                   |         |                  |           |         |       |         |        |        |
| <i>Beta blocking agents, plain</i>                                     |         |                  |           |         |       |         |        |        |
| Beta-receptor-blokerende midler uden kombination                       |         |                  |           |         |       |         |        |        |
| 1995                                                                   | 14.3    | 30.4             | ..        | 42.8    | ..    | 34.3    | 25.6   | 36.0   |
| 2000                                                                   | 19.3    | 36.4             | 11.3      | 51.9    | 44.8  | 39.9    | 33.2   | 43.3   |
| 2003                                                                   | 25.8    | 41.7             | 13.9      | 57.8    | 52.0  | 44.6    | 38.0   | 50.8   |
| 2004                                                                   | 28.5    | 43.8             | 19.0      | 59.5    | 56.9  | 46.0    | 38.9   | 53.1   |
| C08                                                                    |         |                  |           |         |       |         |        |        |
| <i>Calcium channel blockers</i>                                        |         |                  |           |         |       |         |        |        |
| Calciumantagonister                                                    |         |                  |           |         |       |         |        |        |
| 1995                                                                   | 28.2    | 38.2             | 0.0       | 31.0    | ..    | 21.3    | 33.8   | 32.5   |
| 2000                                                                   | 37.2    | 71.0             | 7.8       | 36.7    | 35.9  | 26.7    | 41.5   | 34.9   |
| 2003                                                                   | 42.9    | 76.4             | 15.6      | 44.9    | 42.7  | 30.7    | 45.3   | 38.9   |
| 2004                                                                   | 46.2    | 78.5             | 15.5      | 48.3    | 45.6  | 31.5    | 46.6   | 40.7   |
| C08C                                                                   |         |                  |           |         |       |         |        |        |
| <i>Selective calcium channel blockers with mainly vascular effects</i> |         |                  |           |         |       |         |        |        |
| Selektive kalsiumantagonister med primær effekt på karrerne            |         |                  |           |         |       |         |        |        |
| 1995                                                                   | 18.2    | 30.8             | ..        | 17.7    | ..    | 14.0    | 26.6   | 23.4   |
| 2000                                                                   | 28.8    | 65.3             | 5.9       | 28.5    | 33.3  | 20.5    | 34.9   | 28.6   |
| 2003                                                                   | 35.5    | 72.2             | 14.5      | 39.0    | 40.8  | 24.1    | 39.7   | 34.0   |
| 2004                                                                   | 39.1    | 74.6             | 14.6      | 43.0    | 43.6  | 25.4    | 41.2   | 36.2   |
| C08D                                                                   |         |                  |           |         |       |         |        |        |
| <i>Selective calcium channel blockers with direct cardiac effects</i>  |         |                  |           |         |       |         |        |        |
| Selektive kalsiumantagonister med direkte effekt på hjertet            |         |                  |           |         |       |         |        |        |
| 1995                                                                   | 10.0    | 7.5              | ..        | 13.3    | ..    | 7.2     | 7.2    | 9.1    |
| 2000                                                                   | 8.4     | 5.7              | 1.9       | 8.2     | 2.7   | 6.2     | 6.6    | 6.3    |
| 2003                                                                   | 7.3     | 4.1              | 1.1       | 5.9     | 1.9   | 6.5     | 5.7    | 4.9    |
| 2004                                                                   | 7.1     | 3.9              | 0.9       | 5.2     | 2.0   | 6.2     | 5.4    | 4.5    |

The table continues ...

Table 3.7.7 continued

|                                                      | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| C09                                                  |         |                  |           |         |       |         |        |        |
| <i>Agents acting on the renin-angiotensin system</i> |         |                  |           |         |       |         |        |        |
| Midler med virkning på rennin-angiotensin systemet   |         |                  |           |         |       |         |        |        |
| 1995                                                 | 22.3    | 21.8             | ..        | 40.6    | ..    | 27.8    | 35.8   | 31.2   |
| 2000                                                 | 45.4    | 59.2             | 19.8      | 65.7    | 55.0  | 51.4    | 65.1   | 56.2   |
| 2003                                                 | 73.8    | 86.0             | 30.7      | 107.8   | 87.9  | 76.4    | 96.0   | 79.1   |
| 2004                                                 | 85.1    | 97.7             | 36.5      | 125.3   | 107.9 | 80.9    | 99.1   | 85.6   |
| C09A                                                 |         |                  |           |         |       |         |        |        |
| <i>ACE-inhibitors, plain</i>                         |         |                  |           |         |       |         |        |        |
| ACE-hæmmere ekskl. kombinationer                     |         |                  |           |         |       |         |        |        |
| 1995                                                 | 20.2    | 21.6             | ..        | 35.6    | ..    | 26.5    | 33.8   | 29.7   |
| 2000                                                 | 29.4    | 52.5             | 19.4      | 42.8    | 46.2  | 29.6    | 35.2   | 42.3   |
| 2003                                                 | 43.6    | 60.1             | 28.7      | 64.9    | 64.9  | 31.3    | 42.1   | 51.0   |
| 2004                                                 | 49.0    | 64.8             | 33.8      | 72.3    | 75.2  | 30.3    | 42.0   | 53.1   |
| C09B                                                 |         |                  |           |         |       |         |        |        |
| <i>ACE-inhibitors, combinations</i>                  |         |                  |           |         |       |         |        |        |
| ACE-hæmmere i kombinationer                          |         |                  |           |         |       |         |        |        |
| 1995                                                 | 0.7     | 0.0              | ..        | 5.0     | ..    | 0.4     | 0.2    | 0.7    |
| 2000                                                 | 1.8     | 0.1              | 0.0       | 11.6    | 1.8   | 4.2     | 6.6    | 2.1    |
| 2003                                                 | 3.5     | 2.4              | 0.1       | 13.9    | 2.9   | 6.2     | 7.5    | 2.5    |
| 2004                                                 | 5.2     | 4.1              | 0.1       | 14.4    | 3.5   | 6.8     | 7.2    | 3.1    |
| C09C                                                 |         |                  |           |         |       |         |        |        |
| <i>Angiotensin II antagonists</i>                    |         |                  |           |         |       |         |        |        |
| Angiotensin II antagonisters ekskl. kombinationer    |         |                  |           |         |       |         |        |        |
| 1995                                                 | 1.4     | 0.1              | ..        | ..      | ..    | 1.0     | 1.8    | 0.8    |
| 2000                                                 | 10.6    | 5.9              | 0.5       | 8.2     | 6.0   | 12.9    | 15.6   | 9.8    |
| 2003                                                 | 18.0    | 16.2             | 2.0       | 18.6    | 16.5  | 21.2    | 26.7   | 19.5   |
| 2004                                                 | 19.9    | 19.4             | 2.5       | 24.9    | 23.7  | 22.2    | 28.0   | 21.8   |
| C09D                                                 |         |                  |           |         |       |         |        |        |
| <i>Angiotensin II antagonists, combinations</i>      |         |                  |           |         |       |         |        |        |
| Angiotensin II antagonisters kombinationer           |         |                  |           |         |       |         |        |        |
| 1995                                                 | 0.0     | ..               | ..        | ..      | ..    | 0.0     | ..     | 0.0    |
| 2000                                                 | 3.6     | 0.7              | 0.0       | 3.1     | 1.0   | 4.7     | 7.7    | 2.0    |
| 2003                                                 | 8.8     | 7.3              | 0.0       | 10.4    | 3.6   | 17.8    | 19.7   | 6.2    |
| 2004                                                 | 10.9    | 9.5              | 0.0       | 13.7    | 5.5   | 21.6    | 21.8   | 7.7    |

**Table 3.7.8 Sales of lipid modifying agents (ATC-group C10A),  
DDD/1 000 inhabitants/day, 1995-2004**  
Salg af lipidmodifiserende midler (ATC-gruppe C10A),  
DDD/1 000 indbyggere/døgn 1995-2004

|                                                   | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|---------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| C10A                                              |         |                  |           |         |       |         |        |        |
| <i>Lipid modifying agents</i>                     |         |                  |           |         |       |         |        |        |
| Lipidmodifiserende midler                         |         |                  |           |         |       |         |        |        |
| 1995                                              | 3.1     | 0.9              | ..        | 5.7     | ..    | 6.2     | 11.1   | 8.0    |
| 2000                                              | 16.2    | 19.3             | 3.2       | 32.1    | 14.1  | 34.2    | 59.6   | 36.7   |
| 2003                                              | 45.4    | 49.0             | 30.1      | 67.0    | 32.4  | 64.4    | 98.2   | 65.5   |
| 2004                                              | 67.2    | 61.8             | 43.9      | 81.7    | 40.9  | 75.2    | 110.0  | 75.2   |
| C10AA                                             |         |                  |           |         |       |         |        |        |
| <i>HMG CoA reductase<br/>inhibitors (statins)</i> |         |                  |           |         |       |         |        |        |
| HMG CoA reduktase-<br>hæmmere                     |         |                  |           |         |       |         |        |        |
| 1995                                              | 2.4     | 0.8              | ..        | 4.6     | ..    | 6.2     | 10.8   | 5.8    |
| 2000                                              | 15.6    | 19.2             | 3.1       | 31.2    | 13.9  | 34.0    | 59.3   | 34.9   |
| 2003                                              | 44.9    | 49.0             | 29.9      | 66.1    | 32.2  | 64.5    | 97.8   | 63.8   |
| 2004                                              | 66.6    | 61.4             | 43.7      | 80.5    | 40.4  | 74.6    | 109.4  | 73.1   |

**Table 3.7.9 Sales of oestrogens and oestrogens in combination with progestogens  
(ATC group G03C and G03F), DDD/1 000 inhabitants/day 1995-2004**  
Salg af østrogener og kombinationer af østrogener og progestogener (ATC-  
gruppe G03C og G03F), DDD/1 000 indbyggere/døgn 1995-2004

|                                                         | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|---------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| G03C                                                    |         |                  |           |         |       |         |        |        |
| <i>Oestrogens</i>                                       |         |                  |           |         |       |         |        |        |
| Østrogener                                              |         |                  |           |         |       |         |        |        |
| 1995                                                    | 12.8    | 9.8              | ..        | 23.9    | ..    | 20.3    | 15.0   | 28.2   |
| 2000                                                    | 13.8    | 10.7             | 2.7       | 33.9    | 30.1  | 28.4    | 18.4   | 26.9   |
| 2003                                                    | 12.9    | 9.7              | 2.9       | 29.4    | 24.6  | 21.2    | 14.4   | 19.4   |
| 2004                                                    | 10.2    | 8.9              | 2.4       | 28.0    | 23.5  | 19.8    | 13.6   | 16.5   |
| G03F                                                    |         |                  |           |         |       |         |        |        |
| <i>Progestogens and oestro-<br/>gens in combination</i> |         |                  |           |         |       |         |        |        |
| Progestogener og østro-<br>gener i kombination          |         |                  |           |         |       |         |        |        |
| 1995                                                    | 14.8    | 9.9              | ..        | 13.3    | ..    | 23.4    | 19.9   | 16.8   |
| 2000                                                    | 15.6    | 13.6             | 5.0       | 20.7    | 19.3  | 27.0    | 25.9   | 22.6   |
| 2003                                                    | 13.3    | 12.2             | 5.1       | 18.9    | 14.2  | 15.6    | 16.1   | 15.0   |
| 2004                                                    | 8.2     | 9.0              | 2.7       | 16.1    | 11.6  | 12.7    | 12.9   | 10.3   |

**Table 3.7.10 Sales of drugs used in erectile dysfunction (ATC group G04BE),  
DDD/1 000 males/day 1995-2004**

Salg af midler mod erektionsforstyrrelser (ATC-gruppe G04BE),  
DDD/1 000 mænd/døgn 1995-2004

|      | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| 1999 | 0.6     | 0.1              | 0.2       | 1.4     | 0.6   | 0.6     | 0.4    | 2.1    |
| 2000 | 0.7     | 0.2              | 0.2       | 1.7     | 0.8   | 1.2     | 0.5    | 2.5    |
| 2003 | 1.6     | 0.4              | 0.3       | 3.0     | 1.2   | 2.4     | 1.1    | 1.9    |
| 2004 | 1.9     | 0.6              | 0.7       | 3.7     | 1.6   | 2.8     | 1.2    | 1.1    |

**Table 3.7.11 Sales of antibacterials for systemic use (ATC-group J01),  
DDD/1 000 inhabitants/day, 1995-2004**  
Salg af antibakterielle midler til systemisk brug (ATC-gruppe J01),  
DDD/1 000 indbyggere/døgn 1995-2004

|                                                    | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|----------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| J01                                                |         |                  |           |         |       |         |        |        |
| <i>Antibacterials for<br/>systemic use</i>         |         |                  |           |         |       |         |        |        |
| Antibakterielle midler til sy-<br>stemisk brug     |         |                  |           |         |       |         |        |        |
| 1995                                               | 13.5    | 15.7             | 18.4      | 24.7    | ..    | 21.9    | 17.3   | 18.8   |
| 2000                                               | 13.5    | 17.4             | 20.9      | 22.6    | 21.0  | 20.3    | 16.3   | 17.2   |
| 2003                                               | 15.0    | 18.2             | 19.4      | 22.3    | 21.2  | 20.1    | 17.1   | 16.3   |
| 2004                                               | 15.6    | 17.1             | 16.5      | 20.6    | 21.7  | 21.6    | 17.2   | 16.2   |
| J01A                                               |         |                  |           |         |       |         |        |        |
| <i>Tetracyclines</i>                               |         |                  |           |         |       |         |        |        |
| Tetracykliner                                      |         |                  |           |         |       |         |        |        |
| 1995                                               | 1.6     | 1.2              | 3.1       | 5.6     | ..    | 5.2     | 4.1    | 3.8    |
| 2000                                               | 1.0     | 1.1              | 5.9       | 4.9     | 3.0   | 4.7     | 3.2    | 3.5    |
| 2003                                               | 1.1     | 1.2              | 5.7       | 4.1     | 3.1   | 4.7     | 3.0    | 3.3    |
| 2004                                               | 1.2     | 1.3              | 1.7       | 3.7     | 3.3   | 5.2     | 3.0    | 3.3    |
| J01C                                               |         |                  |           |         |       |         |        |        |
| <i>Beta-lactam antibacterials,<br/>penicillins</i> |         |                  |           |         |       |         |        |        |
| Penicilliner                                       |         |                  |           |         |       |         |        |        |
| 1995                                               | 7.7     | 10.5             | 10.5      | 7.0     | ..    | 10.4    | 7.3    | 8.8    |
| 2000                                               | 8.3     | 10.7             | 9.8       | 6.1     | 8.0   | 10.3    | 7.0    | 8.0    |
| 2003                                               | 9.3     | 11.2             | 9.0       | 6.3     | 8.4   | 10.3    | 7.3    | 7.4    |
| 2004                                               | 9.7     | 10.4             | 9.6       | 5.6     | 8.3   | 11.1    | 7.2    | 7.2    |
| J01CA                                              |         |                  |           |         |       |         |        |        |
| <i>Penicillins with extended<br/>spectrum</i>      |         |                  |           |         |       |         |        |        |
| Penicilliner med udvidet<br>spectrum               |         |                  |           |         |       |         |        |        |
| 1995                                               | 2.8     | 3.3              | 4.2       | 3.4     | ..    | 4.8     | 1.7    | 1.4    |
| 2000                                               | 2.6     | 3.0              | 3.8       | 3.2     | 4.2   | 4.2     | 2.0    | 1.4    |
| 2003                                               | 2.8     | 2.8              | 3.4       | 3.3     | 4.8   | 4.0     | 2.3    | 1.4    |
| 2004                                               | 2.9     | 2.9              | 3.4       | 2.9     | 5.1   | 4.1     | 2.4    | 1.5    |
| J01CE                                              |         |                  |           |         |       |         |        |        |
| <i>Beta-lactamase sensitive<br/>penicillins</i>    |         |                  |           |         |       |         |        |        |
| Beta-lactamase følsomme<br>penicilliner            |         |                  |           |         |       |         |        |        |
| 1995                                               | 4.6     | 6.8              | 5.7       | 3.3     | ..    | 3.7     | 5.4    | 5.9    |
| 2000                                               | 5.0     | 6.7              | 5.5       | 2.3     | 3.3   | 3.1     | 4.7    | 5.0    |
| 2003                                               | 5.4     | 7.0              | 4.7       | 1.9     | 2.8   | 2.5     | 4.4    | 4.3    |
| 2004                                               | 5.5     | 6.3              | 5.5       | 1.7     | 2.4   | 2.9     | 4.2    | 4.1    |

The table continues ...

Table 3.7.11 continued

|                                                                     | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|---------------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| J01CF                                                               |         |                  |           |         |       |         |        |        |
| <i>Beta-lactamase resistant penicillins</i>                         |         |                  |           |         |       |         |        |        |
| Beta-lactamase resistente penicilliner                              |         |                  |           |         |       |         |        |        |
| 1995                                                                | 0.3     | 0.4              | 0.6       | 0.1     | ..    | 1.2     | 0.2    | 1.3    |
| 2000                                                                | 0.7     | 0.9              | 0.5       | 0.1     | 0.2   | 1.3     | 0.4    | 1.3    |
| 2003                                                                | 1.0     | 1.1              | 0.9       | 0.1     | 0.3   | 1.3     | 0.6    | 1.4    |
| 2004                                                                | 1.1     | 1.1              | 0.7       | 0.1     | 0.5   | 1.3     | 0.6    | 1.4    |
| J01CR                                                               |         |                  |           |         |       |         |        |        |
| <i>Combinations of penicillins, incl. beta-lactamase inhibitors</i> |         |                  |           |         |       |         |        |        |
| Komb. af penicilliner, inkl. beta-lactamase hæmmere                 |         |                  |           |         |       |         |        |        |
| 1995                                                                | 0.0     | 0.0              | ..        | 0.2     | ..    | 0.7     | 0.0    | 0.2    |
| 2000                                                                | 0.0     | 0.1              | 0.0       | 0.5     | 0.3   | 1.8     | 0.0    | 0.2    |
| 2003                                                                | 0.1     | 0.1              | 0.0       | 1.0     | 0.4   | 2.4     | 0.0    | 0.2    |
| 2004                                                                | 0.1     | 0.1              | 0.0       | 0.9     | 0.3   | 2.7     | 0.0    | 0.2    |
| J01D                                                                |         |                  |           |         |       |         |        |        |
| <i>Other beta-lactam antibacterials</i>                             |         |                  |           |         |       |         |        |        |
| Cefalosporiner, monobaktamer og carbapenemer                        |         |                  |           |         |       |         |        |        |
| 1995                                                                | 0.0     | 0.2              | ..        | 3.5     | ..    | 0.5     | 0.5    | 1.1    |
| 2000                                                                | 0.2     | 0.3              | 0.1       | 3.0     | 1.6   | 0.6     | 0.5    | 0.8    |
| 2003                                                                | 0.2     | 0.6              | 0.1       | 3.1     | 1.8   | 0.5     | 0.6    | 0.7    |
| 2004                                                                | 0.3     | 0.5              | 0.2       | 3       | 1.7   | 0.5     | 0.6    | 0.7    |
| J01E                                                                |         |                  |           |         |       |         |        |        |
| <i>Sulfanamides and trimethoprim</i>                                |         |                  |           |         |       |         |        |        |
| Sulfonamider og trimethoprim                                        |         |                  |           |         |       |         |        |        |
| 1995                                                                | 0.8     | 1.4              | ..        | 2.9     | ..    | 2.7     | 1.8    | 0.9    |
| 2000                                                                | 0.8     | 1.2              | 0.6       | 2.3     | 1.4   | 2.2     | 1.2    | 0.8    |
| 2003                                                                | 0.9     | 1.2              | 0.5       | 2.0     | 1.0   | 1.9     | 1.1    | 0.8    |
| 2004                                                                | 0.9     | 1.0              | 0.7       | 2.0     | 1.1   | 1.9     | 1.1    | 0.8    |
| J01F                                                                |         |                  |           |         |       |         |        |        |
| <i>Macrolides, lincos-amides and streptogramins</i>                 |         |                  |           |         |       |         |        |        |
| Makrolider, lincosamider og streptograminer                         |         |                  |           |         |       |         |        |        |
| 1995                                                                | 2.1     | 2.1              | 2.2       | 2.0     | ..    | 1.6     | 1.6    | 1.4    |
| 2000                                                                | 2.1     | 2.8              | 3.8       | 2.3     | 0.8   | 1.6     | 1.6    | 1.0    |
| 2003                                                                | 2.2     | 2.6              | 3.4       | 2.6     | 1.0   | 1.6     | 1.9    | 0.9    |
| 2004                                                                | 2.3     | 2.2              | 3.4       | 2.1     | 0.9   | 1.7     | 1.9    | 0.9    |
| J01M                                                                |         |                  |           |         |       |         |        |        |
| <i>Quinolone antibacterials</i>                                     |         |                  |           |         |       |         |        |        |
| Quinoloner                                                          |         |                  |           |         |       |         |        |        |
| 1995                                                                | 0.3     | 0.1              | ..        | 0.9     | ..    | 0.4     | 0.3    | 1.5    |
| 2000                                                                | 0.2     | 0.1              | 0.1       | 1.0     | 1.1   | 0.6     | 0.3    | 1.2    |
| 2003                                                                | 0.4     | 0.2              | 0.2       | 1.3     | 1.3   | 0.7     | 0.5    | 1.2    |
| 2004                                                                | 0.4     | 0.2              | 0.2       | 1.3     | 1.3   | 0.8     | 0.5    | 1.2    |

**Table 3.7.12 Sales of non-steroid anti-inflammatory and antiheumatic products (NSAID) and other analgesics (ATC-group M01A, N02A and N02B) DDD/1 000 inhabitants/day, 1995-2004**

Salg af NSAID og andre smertestillende midler (ATC-gruppe M01A, N02A og N02B), DDD/1 000 indbyggere/døgn 1995-2004

|                                                                   | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------------------------------------------|---------|---------------|-----------|---------|-------|---------|--------|--------|
| M01A                                                              |         |               |           |         |       |         |        |        |
| <i>Anti-inflammatory and antirheumatic products, non-steroids</i> |         |               |           |         |       |         |        |        |
| NSAID                                                             |         |               |           |         |       |         |        |        |
| 1995                                                              | 29.7    | 28.8          | 17.1      | 52.7    | ..    | 36.7    | 24.6   | 33.6   |
| 2000                                                              | 31.0    | 22.3          | 15.4      | 60.6    | 45.5  | 51.3    | 33.8   | 40.9   |
| 2003                                                              | 41.1    | 31.7          | 21.9      | 70.0    | 50.0  | 69.6    | 48.3   | 51.1   |
| 2004                                                              | 56.3    | ..            | 17.9      | 74.8    | 54.8  | 74.9    | 51.8   | 53.1   |
| M01AH                                                             |         |               |           |         |       |         |        |        |
| <i>Coxibs</i>                                                     |         |               |           |         |       |         |        |        |
| Coxibs                                                            |         |               |           |         |       |         |        |        |
| 1999                                                              | 0.0     | 0.0           | 0.0       | 0.0     | 0.0   | 0.0     | ..     | 0.3    |
| 2000                                                              | 1.6     | 0.6           | 0.0       | 0.7     | 0.3   | 4.0     | 1.8    | 4.1    |
| 2003                                                              | 8.4     | 9.1           | 4.5       | 10.2    | 4.7   | 12.8    | 19.9   | 7.6    |
| 2004                                                              | 6.2     | ..            | 0.6       | 14.5    | 5.2   | 15.2    | 21.8   | 7.1    |
| N02A                                                              |         |               |           |         |       |         |        |        |
| <i>Opioids</i>                                                    |         |               |           |         |       |         |        |        |
| Stærke smertestillende midler (opioider)                          |         |               |           |         |       |         |        |        |
| 1995                                                              | 9.6     | 3.2           | ..        | 5.7     | ..    | 6.9     | 14.6   | 26.9   |
| 2000                                                              | 14.9    | 3.9           | 2.7       | 10.4    | 6.6   | 14.8    | 17.3   | 26.4   |
| 2003                                                              | 17.0    | 4.7           | 3.7       | 14.0    | 7.6   | 15.6    | 19.8   | 23.5   |
| 2004                                                              | 17.8    | 6.4           | 4.6       | 13.9    | 8.7   | 15.8    | 19.1   | 21.9   |
| N02B                                                              |         |               |           |         |       |         |        |        |
| <i>Other analgesics</i>                                           |         |               |           |         |       |         |        |        |
| Andre smertestillende midler                                      |         |               |           |         |       |         |        |        |
| 1995                                                              | 61.7    | 38.7          | 30.7      | 18.7    | ..    | 31.5    | 25.6   | 43.0   |
| 2000                                                              | 69.1    | 44.0          | 37.5      | 13.3    | 27.9  | 29.2    | 26.4   | 45.5   |
| 2003                                                              | 70.1    | 57.4          | 34.4      | 16.2    | 28.9  | 28.0    | 27.6   | 47.0   |
| 2004                                                              | 70.4    | 54.2          | 39.9      | 17.7    | 31.7  | 28.4    | 27.8   | 47.6   |
| N02BA                                                             |         |               |           |         |       |         |        |        |
| <i>Salicylic acid and derivatives</i>                             |         |               |           |         |       |         |        |        |
| Salicylsyre-derivater                                             |         |               |           |         |       |         |        |        |
| 1995                                                              | 22.0    | 20.9          | ..        | 14.6    | ..    | 9.2     | 3.2    | 16.3   |
| 2000                                                              | 18.0    | 19.5          | 9.9       | 7.3     | 12.4  | 4.4     | 1.3    | 12.5   |
| 2003                                                              | 14.9    | 18.2          | 6.5       | 5.5     | 8.8   | 3.3     | 0.8    | 10.5   |
| 2004                                                              | 14.3    | 14.7          | 7.0       | 5.7     | 9.0   | 3.2     | 0.6    | 10.1   |

*The table continues ...*

Table 3.7.12 continued

|                    | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|--------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| N02BB              |         |                  |           |         |       |         |        |        |
| <i>Pyrazolones</i> |         |                  |           |         |       |         |        |        |
| Pyrazoloner        |         |                  |           |         |       |         |        |        |
| 1995               | 2.6     | 0.3              | ..        | 0.4     | ..    | 0.7     | 5.9    | 0.3    |
| 2000               | 1.8     | 0.1              | 0.0       | 0.0     | 0.0   | 0.4     | 4.2    | 0.1    |
| 2003               | 1.3     | 0.1              | 0.0       | 0.0     | 0.0   | 0.0     | 3.6    | 0.1    |
| 2004               | 0.8     | 0.0              | 0.0       | 0.0     | 0.0   | 0.0     | 3.5    | 0.1    |
| N02BE              |         |                  |           |         |       |         |        |        |
| <i>Anilides</i>    |         |                  |           |         |       |         |        |        |
| Anilider           |         |                  |           |         |       |         |        |        |
| 1995               | 37.1    | 17.4             | ..        | 3.4     | ..    | 21.6    | 16.5   | 26.4   |
| 2000               | 49.4    | 24.3             | 27.5      | 6.0     | 15.5  | 24.4    | 20.8   | 32.8   |
| 2003               | 53.9    | 39.0             | 28.0      | 10.7    | 20.1  | 24.8    | 23.3   | 36.3   |
| 2004               | 55.3    | 39.5             | 33.0      | 12.0    | 22.7  | 25.1    | 23.7   | 37.4   |

Table 3.7.13 Sales of antipsychotics (ATC-group N05A), DDD/1 000 inhabitants/day, 1995-2004

Salg af antipsykotiske midler (ATC-gruppe N05A),  
DDD/1 000 indbyggere/døgn 1995-2004

|      | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| 1995 | 6.6     | 7.7              | 9.4       | 15.2    | ..    | 8.4     | 8.7    | 8.8    |
| 2000 | 10.0    | 8.5              | 11.8      | 15.3    | 8.7   | 9.5     | 9.0    | 8.6    |
| 2003 | 11.9    | 9.5              | 11.7      | 16.1    | 9.5   | 10.5    | 9.9    | 8.7    |
| 2004 | 12.5    | 10.6             | 12.1      | 16.7    | 9.8   | 11.0    | 10.6   | 9.0    |

**MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE**
**Table 3.7.14 Sales of anxiolytics (ATC-group N05B), DDD/1 000 inhabitants/day, 1999-2004**

Salg af angstdæmpende midler (ATC-gruppe N05B),  
DDD/1 000 indbyggere/døgn 1995-2004

|                                   | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-----------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| N05B                              |         |                  |           |         |       |         |        |        |
| <i>Anxiolytics</i>                |         |                  |           |         |       |         |        |        |
| Angstdæmpende midler              |         |                  |           |         |       |         |        |        |
| 1995                              | 26.6    | 19.6             | 5.2       | 28.9    | ..    | 23.0    | 18.9   | 17.2   |
| 2000                              | 22.8    | 16.2             | 5.1       | 30.1    | 10.6  | 24.6    | 19.0   | 17.1   |
| 2003                              | 21.5    | 16.0             | 4.6       | 32.0    | 9.9   | 24.9    | 20.4   | 16.3   |
| 2004                              | 20.8    | 16.3             | 4.3       | 31.9    | 9.4   | 26.1    | 21.3   | 16.4   |
| N05BA                             |         |                  |           |         |       |         |        |        |
| <i>Benzodiazepine derivatives</i> |         |                  |           |         |       |         |        |        |
| Benzodiazepin-derivater           |         |                  |           |         |       |         |        |        |
| 1995                              | 26.5    | ..               | ..        | 27.5    | ..    | 22.4    | 18.3   | 15.1   |
| 2000                              | 22.5    | 16.1             | 5.1       | 28.3    | 8.9   | 23.6    | 18.0   | 14.9   |
| 2003                              | 21.2    | 15.8             | 4.6       | 30.3    | 8.1   | 23.9    | 19.3   | 13.9   |
| 2004                              | 20.6    | 16.1             | 4.3       | 30.1    | 7.3   | 25.0    | 20.1   | 13.8   |

**Table 3.7.15 Sales of hypnotics and sedatives (ATC-group N05C), DDD/1 000 inhabitants/day, 1995-2004**

Salg af sovemidler og beroligende midler (ATC-gruppe N05), DDD/1 000 indbyggere/døgn 1995-2004

|                                     | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| N05C                                |         |                  |           |         |       |         |        |        |
| <i>Hypnotics and sedatives</i>      |         |                  |           |         |       |         |        |        |
| Sovemidler og beroligende midler    |         |                  |           |         |       |         |        |        |
| 1995                                | 44.4    | 43.1             | 5.1       | 39.5    | ..    | 41.2    | 25.9   | 40.7   |
| 2000                                | 32.5    | 33.3             | 5.4       | 49.0    | 35.2  | 55.4    | 31.8   | 47.2   |
| 2003                                | 32.7    | 33.3             | 6.4       | 55.9    | 37.7  | 61.8    | 36.9   | 49.0   |
| 2004                                | 32.2    | 31.6             | 9.3       | 55.0    | 33.9  | 64.9    | 41.4   | 50.4   |
| N05CD                               |         |                  |           |         |       |         |        |        |
| <i>Benzodiazepine derivatives</i>   |         |                  |           |         |       |         |        |        |
| Benzodiazepin-derivater             |         |                  |           |         |       |         |        |        |
| 1995                                | 32.6    | ..               | ..        | 20.1    | ..    | 38.3    | 21.7   | 22.8   |
| 2000                                | 15.6    | 13.3             | 0.9       | 21.0    | 7.0   | 28.8    | 13.6   | 13.3   |
| 2003                                | 12.8    | 10.5             | 0.5       | 22.2    | 5.7   | 14.9    | 9.2    | 8.3    |
| 2004                                | 11.6    | 7.8              | 0.5       | 21.6    | 4.6   | 13.3    | 8.5    | 7.4    |
| N05CF                               |         |                  |           |         |       |         |        |        |
| <i>Benzodiazepine related drugs</i> |         |                  |           |         |       |         |        |        |
| Benzodiazepine lignende midler      |         |                  |           |         |       |         |        |        |
| 1995                                | 11.9    | ..               | ..        | 17.7    | ..    | 2.3     | 4.2    | 7.1    |
| 2000                                | 16.8    | 20.0             | 4.5       | 27.4    | 27.2  | 26.5    | 18.1   | 21.6   |
| 2003                                | 19.9    | 22.8             | 5.9       | 33.2    | 31.3  | 46.8    | 27.6   | 27.2   |
| 2004                                | 20.5    | 20.5             | 8.8       | 32.9    | 28.6  | 51.4    | 32.8   | 29.0   |

**Table 3.7.16 Sales of antidepressants (ATC-group N06A),  
DDD/1 000 inhabitants/day, 1995-2004**  
Salg af antidepressive midler (ATC-gruppe N06A),  
DDD/1 000 indbyggere/døgn 1995-2004

|                                                        | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|--------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| <b>N06A</b>                                            |         |                  |           |         |       |         |        |        |
| <i>Antidepressants</i>                                 |         |                  |           |         |       |         |        |        |
| <i>Antidepressive midler</i>                           |         |                  |           |         |       |         |        |        |
| 1995                                                   | 18.3    | 10.6             | 3.9       | 20.3    | ..    | 33.0    | 22.5   | 27.8   |
| 2000                                                   | 34.7    | 18.2             | 10.1      | 35.5    | 23.8  | 70.5    | 41.0   | 48.8   |
| 2003                                                   | 52.2    | 28.3             | 15.3      | 45.9    | 34.4  | 90.6    | 51.7   | 62.5   |
| 2004                                                   | 54.9    | 33.5             | 15.7      | 49.1    | 39.7  | 91.9    | 52.2   | 64.3   |
| <b>N06AA</b>                                           |         |                  |           |         |       |         |        |        |
| <i>Non-selective monoamine<br/>reuptake inhibitors</i> |         |                  |           |         |       |         |        |        |
| <i>Ikke-selktive monoamin<br/>genoptagelseshæmmere</i> |         |                  |           |         |       |         |        |        |
| 1995                                                   | 5.3     | 4.1              | ..        | 5.0     | ..    | 9.7     | 6.3    | 5.4    |
| 2000                                                   | 4.6     | 2.8              | 1.6       | 4.4     | 3.4   | 8.6     | 4.5    | 4.0    |
| 2003                                                   | 4.3     | 2.6              | 1.2       | 4.2     | 3.0   | 8.2     | 3.9    | 3.9    |
| 2004                                                   | 4.3     | 2.3              | 0.7       | 4.2     | 3.4   | 8.2     | 3.9    | 3.9    |
| <b>N06AB</b>                                           |         |                  |           |         |       |         |        |        |
| <i>Selective serotonin<br/>reuptake inhibitors</i>     |         |                  |           |         |       |         |        |        |
| <i>Selektive serotoninin-<br/>genoptagelseshæmmere</i> |         |                  |           |         |       |         |        |        |
| 1995                                                   | 11.9    | 5.7              | ..        | 12.1    | ..    | 18.9    | 11.2   | 21.0   |
| 2000                                                   | 23.9    | 12.1             | 8.2       | 24.2    | 16.8  | 49.2    | 29.9   | 37.1   |
| 2003                                                   | 36.8    | 19.8             | 12.4      | 31.9    | 25.0  | 59.8    | 36.3   | 46.9   |
| 2004                                                   | 38.3    | 24.1             | 13.0      | 33.5    | 29.2  | 61.8    | 36.1   | 48.0   |
| <b>N06AG</b>                                           |         |                  |           |         |       |         |        |        |
| <i>Monoamine oxidase<br/>type A inhibitors</i>         |         |                  |           |         |       |         |        |        |
| <i>Monoamin-oxidase<br/>type A hæmmere</i>             |         |                  |           |         |       |         |        |        |
| 1995                                                   | 0.3     | 0.1              | ..        | 1.6     | ..    | 2.0     | 1.9    | 0.7    |
| 2000                                                   | 0.1     | 0.0              | 0.0       | 1.3     | 0.3   | 2.0     | 0.6    | 0.4    |
| 2003                                                   | 0.1     | 0.0              | 0.0       | 0.9     | 0.6   | 1.2     | 0.4    | 0.3    |
| 2004                                                   | 0.1     | 0.0              | 0.0       | 0.8     | 0.2   | 0.9     | 0.3    | 0.2    |
| <b>N06AX</b>                                           |         |                  |           |         |       |         |        |        |
| <i>Other antidepressants</i>                           |         |                  |           |         |       |         |        |        |
| <i>Andre antidepressiva</i>                            |         |                  |           |         |       |         |        |        |
| 1995                                                   | 0.6     | 0.6              | ..        | 0.2     | ..    | 2.4     | 3.0    | 0.7    |
| 2000                                                   | 6.0     | 3.3              | 0.4       | 5.6     | 3.3   | 10.7    | 6.1    | 7.3    |
| 2003                                                   | 10.9    | 5.8              | 1.7       | 9.1     | 6.0   | 21.4    | 11.1   | 11.5   |
| 2004                                                   | 12.0    | 7.0              | 2.0       | 10.7    | 6.9   | 20.9    | 11.8   | 12.2   |

**Table 3.7.17 Sales of anti-dementia drugs (ATC-group N06D),  
DDD/1 000 inhabitants/day, 1999–2004**

Salg af midler mod demens (ATC-gruppe N06D), DDD/1 000 indbyggere/dag,  
1999–2004

|      | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| 1999 | 0.30    | 0.15             | 0.02      | 0.63    | 0.41  | 0.95    | 0.34   | 0.86   |
| 2000 | 0.46    | 0.32             | 0.01      | 1.12    | 0.42  | 1.37    | 0.73   | 1.20   |
| 2003 | 1.45    | 0.74             | 0.01      | 3.70    | 1.14  | 2.35    | 2.39   | 2.59   |
| 2004 | 1.80    | 0.79             | 0.06      | 5.23    | 2.14  | 2.68    | 2.95   | 3.00   |

**Table 3.7.18 Sales of drug used in nicotine dependence (ATC-group N07BA),  
DDD/1 000 inhabitants/day, 1999–2004**

Salg af midler mod nikotinafhængighed (ATC-gruppe N07BA),  
DDD/1 000 indbyggere/døgn 1999–2004

|                  | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| <b>N07BA01</b>   |         |                  |           |         |       |         |        |        |
| <i>Nicotine</i>  |         |                  |           |         |       |         |        |        |
| Nicotin          |         |                  |           |         |       |         |        |        |
| 1999             | 3.3     | 1.7              | 1.3       | 2.6     | 4.0   | 12.2    | 2.4    | 5.1    |
| 2000             | 4.1     | 2.3              | 1.6       | 2.6     | 3.8   | 14.2    | 2.7    | 5.3    |
| 2003             | 5.4     | 3.0              | 1.9       | 4.1     | 4.6   | 16.6    | 3.6    | 5.8    |
| 2004             | 6.5     | 3.2              | 1.5       | 4.8     | 5.3   | 18.1    | 3.4    | 6.3    |
| <b>N07BA02</b>   |         |                  |           |         |       |         |        |        |
| <i>Bupropion</i> |         |                  |           |         |       |         |        |        |
| Bupropion        |         |                  |           |         |       |         |        |        |
| 1999             | 0.3     | 0.0              | 0.0       | ..      | ..    | 1.1     | 0.3    | 0.1    |
| 2000             | 0.3     | 0.1              | 0.0       | ..      | ..    | 1.6     | 0.6    | 0.2    |
| 2003             | 0.2     | 0.2              | 0.0       | 0.2     | 0.1   | 1.1     | 0.8    | 0.2    |
| 2004             | 0.2     | 0.2              | 0.1       | 0.4     | 0.2   | 1.1     | 0.3    | 0.3    |

**Table 3.7.19 Sales of drugs for obstructive airway diseases (ATC-group R03),  
DDD/1 000 inhabitants/day, 1995-2004**

Salg af midler til obstruktive luftvejssygdomme (ATC-gruppe R03),  
DDD/1 000 indbyggere/døgn 1995-2004

|                                                                            | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|----------------------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| <b>R03</b>                                                                 |         |                  |           |         |       |         |        |        |
| <i>Drugs for obstructive<br/>airway diseases</i>                           |         |                  |           |         |       |         |        |        |
| Midler til obstruktive<br>luftvejssygdomme                                 |         |                  |           |         |       |         |        |        |
| 1995                                                                       | 59.2    | 27.1             | ..        | 42.9    | ..    | 43.8    | 57.2   | 64.7   |
| 2000                                                                       | 64.0    | 35.9             | 31.7      | 49.9    | 47.9  | 48.2    | 62.1   | 56.4   |
| 2003                                                                       | 62.0    | 36.0             | 28.5      | 51.0    | 49.7  | 44.9    | 61.0   | 51.7   |
| 2004                                                                       | 61.9    | 37.4             | 32.7      | 50.9    | 52.9  | 44.1    | 60.2   | 51.0   |
| <b>R03A</b>                                                                |         |                  |           |         |       |         |        |        |
| <i>Adrenergics, inhalants</i>                                              |         |                  |           |         |       |         |        |        |
| Adrenergika til inhalation                                                 |         |                  |           |         |       |         |        |        |
| 1995                                                                       | 28.3    | ..               | ..        | 15.6    | ..    | 20.4    | 26.2   | 29.4   |
| 2000                                                                       | 32.8    | 18.3             | 16.8      | 20.2    | 19.3  | 22.1    | 30.7   | 25.6   |
| 2003                                                                       | 34.4    | 18.3             | 15.1      | 25.6    | 24.9  | 28.1    | 34.8   | 26.6   |
| 2004                                                                       | 35.5    | 20.1             | 15.0      | 27.2    | 28.6  | 29.6    | 35.5   | 27.3   |
| <b>R03AC</b>                                                               |         |                  |           |         |       |         |        |        |
| <i>Selective beta-2-<br/>adrenoceptor agonists</i>                         |         |                  |           |         |       |         |        |        |
| Selektive beta-2-<br>adrenoceptor agonister                                |         |                  |           |         |       |         |        |        |
| 1995                                                                       | 27.2    | 14.4             | 10.0      | 15.6    | ..    | 20.4    | 26.2   | 29.2   |
| 2000                                                                       | 25.0    | 18.3             | 16.7      | 15.3    | 14.1  | 20.6    | 24.9   | 22.7   |
| 2003                                                                       | 23.0    | 17.9             | 14.8      | 12.3    | 10.7  | 15.0    | 19.6   | 18.4   |
| 2004                                                                       | 22.5    | 17.6             | 14.7      | 11.4    | 10.5  | 13.7    | 18.4   | 17.4   |
| <b>R03AK</b>                                                               |         |                  |           |         |       |         |        |        |
| <i>Adrenergics and other<br/>drugs for obstructive<br/>airway diseases</i> |         |                  |           |         |       |         |        |        |
| Adrenergika og andre midler<br>ved obstruktive luftvejssyg-<br>domme       |         |                  |           |         |       |         |        |        |
| 1995                                                                       | 2.2     | ..               | ..        | 0.8     | ..    | 0.0     | ..     | 0.0    |
| 2000                                                                       | 7.8     | 0.1              | 0.2       | 4.9     | 5.2   | 1.5     | 5.8    | 2.8    |
| 2003                                                                       | 11.4    | 0.3              | 0.3       | 13.4    | 14.2  | 13.1    | 15.2   | 8.2    |
| 2004                                                                       | 12.9    | 2.5              | 0.3       | 15.8    | 18.1  | 15.9    | 17.1   | 9.8    |
| <b>R03B</b>                                                                |         |                  |           |         |       |         |        |        |
| <i>Other drugs for obstructive<br/>airway diseases, inhalants</i>          |         |                  |           |         |       |         |        |        |
| Andre midler ved obstruktive<br>luftvejssygdomme til inhalation            |         |                  |           |         |       |         |        |        |
| 1995                                                                       | 19.6    | 8.3              | 5.8       | 20.7    | ..    | 18.6    | 23.6   | 29.1   |
| 2000                                                                       | 22.7    | 15.4             | 11.7      | 23.7    | 21.1  | 22.3    | 26.2   | 25.9   |
| 2003                                                                       | 21.8    | 16.2             | 11.0      | 19.4    | 18.6  | 13.9    | 20.5   | 21.6   |
| 2004                                                                       | 21.3    | 16.1             | 15.4      | 17.8    | 18.6  | 11.9    | 19.1   | 20.3   |

The table continues ...

# MORBIDITY, MEDICAL TREATMENT, ACCIDENTS AND MEDICINE

**Table 3.7.19 continued**

|                                                                      | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|----------------------------------------------------------------------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| R03C                                                                 |         |                  |           |         |       |         |        |        |
| Adrenergics for systemic use                                         |         |                  |           |         |       |         |        |        |
| Adrenergika midler<br>til systemisk brug                             |         |                  |           |         |       |         |        |        |
| 1995                                                                 | 5.2     | 1.6              | ..        | 0.9     | ..    | 0.6     | 2.1    | 2.5    |
| 2000                                                                 | 3.1     | 0.8              | 1.2       | 0.6     | 0.8   | 0.2     | 0.8    | 1.3    |
| 2003                                                                 | 2.1     | 0.7              | 0.6       | 0.4     | 0.5   | 0.1     | 0.6    | 0.9    |
| 2004                                                                 | 1.8     | 0.6              | 0.6       | 0.3     | 0.3   | 0.1     | 0.6    | 0.8    |
| R03D                                                                 |         |                  |           |         |       |         |        |        |
| Other systemic drugs for<br>obstructive airway diseases              |         |                  |           |         |       |         |        |        |
| Andre midler ved obstruktive<br>lyftvejssygdomme, til systemisk brug |         |                  |           |         |       |         |        |        |
| 1995                                                                 | 7.3     | 2.7              | ..        | 5.7     | ..    | 4.3     | 5.3    | 3.8    |
| 2000                                                                 | 5.3     | 1.3              | 2.0       | 5.5     | 6.8   | 3.6     | 4.4    | 3.7    |
| 2003                                                                 | 3.8     | 0.9              | 1.7       | 5.6     | 5.6   | 2.7     | 5.1    | 2.6    |
| 2004                                                                 | 3.4     | 0.6              | 1.7       | 5.6     | 5.4   | 2.5     | 5.0    | 2.7    |

**Table 3.7.20 Sales of antihistamines for systemic use (ATC-group R06A),  
DDD/1 000 inhabitants/day, 1995-2004**  
Salg af antihistaminer til systemisk brug (ATC-gruppe R06A),  
DDD/1 000 indbyggere/døgn 1995-2004

|      | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|------|---------|------------------|-----------|---------|-------|---------|--------|--------|
| 1995 | 10.7    | 10.9             | ..        | 12.5    | ..    | 19.4    | 32.9   | 20.3   |
| 2000 | 14.1    | 13.8             | 2.8       | 21.0    | 21.9  | 24.9    | 39.3   | 25.5   |
| 2003 | 17.6    | 16.9             | 5.1       | 27.4    | 24.1  | 28.3    | 49.2   | 27.3   |
| 2004 | 19.0    | 20.9             | 6.4       | 27.5    | 25.1  | 29.5    | 51.3   | 29.3   |

## CHAPTER IV

# Mortality and causes of death

## *Dødelighed og dødsårsager*

### Extra Materials

[European short list for causes of death](#)

[Data from the European  
short list for causes of death](#)

EUROSTAT:

[www.eurostat.eu](http://www.eurostat.eu)

### Supplerende Materiale

[Den forkortede europæiske dødsårsagsliste](#)

[Data fra den europæiske  
forkortede dødsårsagsliste](#)

### *The International Classification of Diseases (ICD)*

The main use of the International Classification of Diseases (ICD), developed by the World Health Organization (WHO), is as an instrument for statistical description of morbidity and mortality. The ICD is a system that groups diseases and causes of death in a meaningful way, in order to provide statistical overviews and analyses, such as comparisons between countries over a period of time. The history of the ICD goes back more than a hundred years, and the classification has been revised approximately every ten years in order to reflect developments within medicine. The most recent revision, the tenth (ICD-10), was adopted by WHO in 1990 but was implemented in most countries several years later. The Nordic countries began to use ICD-10 for registration of mortality in the following years: Denmark in 1994, Finland, Iceland and Norway in 1996 and Sweden in 1997. ICD-10 is continually revised, through WHO's revision procedures, and a revised version of ICD-10 was published in 2004.

Revisions of the classification make statistical comparisons of countries over time difficult, when different versions of ICD are used at the same time. It is therefore important to have an understanding of the possible sources of error that a change in classification introduces in the morbidity and mortality statistics, and how to handle these problems. The most recent revision has above all meant an increase in the level of detail in ICD. Many new diagnoses have been added as a result of developments in medicine. Also, certain diseases or groups of diseases have been

### *Den internationale sygdomsklassifikation (ICD)*

Den internationale sygdomsklassifikation (ICD), som udarbejdes af Verdenssundhedsorganisationen (WHO), har som sin vigtigste anvendelse at være instrument for statistiske beskrivelser af sygelighed og dødelighed. Det er et system som på meningsfuld måde grupperer sygdomme og dødsårsager, så der kan gives overskuelige statistiske opstillinger og analyser, som for eksempel sammenligninger mellem forskellige lande over en tidsperiode. ICD's historie er over 100 år, og klassifikationen er blevet revideret ca. hvert tiende år for at den kan afspejle den medicinske udvikling. Den seneste, tiende revision (ICD-10) blev godkendt af WHO i 1990, men blev først taget i brug i de fleste lande adskillige år senere. I de nordiske lande blev ICD-10 taget i brug til dødsårsagsregistrering i 1994 i Danmark, i Finland, Island og Norge i 1996, og i Sverige i 1997. Der foretages en fortløbende revision af ICD-10, via WHO's opdateringsprocedurer, og en revideret version af ICD-10 blev udgivet i 2004.

Revision af klassifikationen vanskeliggør statistiske sammenligninger over tid mellem lande, når de på samme tid anvender forskellige versioner af ICD. Det er derfor vigtigt at forsøge at forstå hvilke fejlkilder et klassifikationsskifte kan medføre for analysen af morbiditets- og mortalitetsstatistikken samt hvorledes problemet kan håndteres. Det seneste klassifikationsskifte har frem for alt medført en større detaljeringsgrad i ICD. Der er medtaget et stort antal nye diagnoser som følge af den medicinske udvikling. Samtidig er enkelte sygdomme og sygdomsgrupperinger flyt-

transferred to other chapters in order to reflect new medical knowledge.

tet til andre kapitler for at det bedre kan afspejle det medicinske vidensniveau.

### *Sources of error*

Statistical analyses are carried out on aggregated data, for example at the level of the chapter. There are 21 chapters in ICD-10. The basic structure of ICD has generally remained the same through the revisions and most chapters have the same name. However, it is important to realize that even if the name of a chapter is the same in ICD-10 as in ICD-9 differences in content may exist due to the transfer of diagnostic codes from one chapter to another. For example, HIV and AIDS were originally placed among diseases of the immune system in ICD-9 but were moved to the chapter for infectious diseases in ICD-10. Another example is the transfer of transitory ischemic attacks from the chapter for circulatory diseases in ICD-9 to the chapter for nervous system diseases in ICD-10. Certain symptoms have also been moved from the chapter for symptoms to the system chapters.

Another potential source of error is that certain rules and guidelines for the use of ICD have been changed in connection with the new revision. With reference to mortality statistics, certain rules for the selection of underlying cause of death have been altered, which may, for example, affect the frequency of pneumonia as a cause of death. Beside changes in the international rules, national rules for applying the classification may also be modified in connection with a classification change, which will affect both comparisons over time within a country and comparisons between countries.

### *Fejlkilder*

Statistiske analyser foretages på et aggregeret niveau. Dette niveau kan være kapitelinddelingen i ICD-10, som i alt består af 21 kapitler. Grundstrukturen i ICD er dog i det store og hele blevet bevaret uforandret igennem de forskellige revisioner og de fleste kapitler har beholdt det samme navn. Det er imidlertid vigtigt at indse, at selvom et kapitel hedder det samme i ICD-10 som i ICD-9, kan der findes forskelle ved at diagnoser er flyttet fra et kapitel til et andet. Et eksempel i nogle lande er HIV og AIDS som præliminært blev placeret blandt immunsygdommene i ICD-9 men blev placeret under infektionssygdomme i ICD-10. Et andet eksempel er flytningen af cerebral transitorisk iskæmi fra cirkulationssystemets sygdomme i ICD-9 til nervesystemets sygdomme i ICD-10. Visse symptomer er også blevet flyttet mellem symptomkapitlet og de såkaldte organkapitler.

En anden fejlkilde er at visse regler og anvisninger for brugen af ICD er ændret i forbindelse med klassifikationsskiftet. Indenfor dødsårsagsstatistikken er for eksempel visse regler for valg af den underliggende dødsårsag blevet ændret, hvilket for eksempel kan påvirke frekvensen af pneumoni som dødsårsag. Ved siden af de internationale regelændringer kan de nationale tilpasninger ændres i forbindelse med et klassifikationsskifte, hvilket både påvirker sammenligningerne over tid i det samme land og sammenligninger mellem flere lande.

It is commonly believed that a direct translation of codes in different versions of ICD can solve the problem of changes in classification. However, this is not so simple. A direct, unambiguous translation is possible only for about one third of the codes in ICD-9 and ICD-10. Instead, an attempt must be made to make the aggregated groups of codes used for statistical presentations as comparable as possible, so as to eliminate some of the effects of the changes in classification. The so-called short lists used in this publication for mortality statistics have been defined both according to ICD-9 and ICD-10 with comparability in mind.

Det er ikke usædvanligt at tro, at en automatisk oversættelse af koderne i forskellige ICD versioner kan løse problemerne ved et klassifikationsskifte. Dette er imidlertid ikke en nemt fremkommelig vej. Kun for en tredjedel af koderne i ICD-9 og ICD-10 er der en direkte og entydig oversættelse mellem koderne. I stedet for bør man stræbe efter, at de aggregerede grupper man anvender til statistiske sammenligninger konstrueres så det er muligt at eliminere nogle af de problemer, klassifikationsændringerne har skabt. De såkaldte kortlister som anvendes i denne publikation for mortalitet er defineret både i relation til ICD-9 og ICD-10 ud fra tanken om sammenlignelighed.

### *Change in Classification*

However, one must always be aware of the fact that an observed difference over time or between countries may be the result of a change in classification or other methodological issues. One way of quantifying the effect of a classification change is so-called bridge coding. In such studies the same material, such as death certificates or hospital records, is coded twice independently, first according to the previous classification and then according to the new classification. The differences observed when comparing the two sets of statistics give an indication of how much a certain group of diseases (e.g. the ICD chapter for circulatory diseases) has increased or decreased as a result of the change in classification itself. This type of study demands a great deal of resources and only a few, limited bridge-coding studies have been carried out on the change from ICD-9 to ICD-10.

### *Klassifikationsskifte*

Man må imidlertid altid være klar over at en observeret forskel over tid eller mellem lande kan være effekten af et klassifikationsskifte samt andre metodologiske problemstillinger. En måde hvorpå man kan kvantificere betydningen af et klassifikationsskifte er den såkaldte "bridge kodning". Dette indebærer at man koder samme materiale, så som dødsattester og sygehusjournaler, to gange, uafhængig af hinanden, først efter den tidligere klassifikation og derefter efter den nye. De forskelle som fremkommer når man siden hen sammenligner de statistiske grupperinger baseret på de to kodninger, giver en opfattelse af hvor meget en vis sygdomsgruppe (eksempelvis ICD-kapitlet om cirkulationsorganernes sygdomme) stiger eller falder som en direkte følge af klassifikations-skiftet. Denne type studier er dog ressourcekrævende og der er kun gennemført et fåtal begrænsede bridgekodnings-studier i forbindelse med overgangen fra ICD-9 til ICD-10.

*Coding practice*

Differences in the national coding practices is another factor of importance to the comparability of causes of death between countries. What is shown in the statistics is the underlying cause of death. WHO has drawn up guidelines for the choice of the underlying cause of death, i.e. the disease or injury that initiated the chain of morbid events leading directly to death, or the circumstances of the accident or violence that produced the fatal injury. The problem in connection with comparability is that, in some cases where two or more causes of death have been recorded on the death certificate, the choice of the underlying cause of death will differ from country to country, since the rules can be interpreted differently.

Apart from the fact that the ICD rules governing mortality coding give room for interpretation, different national traditions for the choice of underlying cause of death may also develop. An example of this is the use of the diagnostic group "insufficiently defined conditions" (codes I469, I959, I99; J960, J969; P285.0; R000-R948; R96-99). The use of these codes as underlying causes of death is more widespread in Denmark than in the other Nordic countries, in situations where more specific causes of death are also recorded on the death certificate. (See Table 4.1.11.)

However, several other factors also influence comparability, such as the type of information the statistics producer has access to and the quality of that material (death certificates, etc.).

*Kodningspraksis*

Et andet forhold af stor betydning for sammenligneligheden af dødsårsagerne mellem flere lande, er den kodningspraksis, der er etableret i de enkelte lande. Det som vises i statistikken er den underliggende dødsårsag, hvor WHO har udarbejdet retningslinier for valget af den underliggende dødsårsag, hvilket vil sige den sygdom eller skade som starter rækken af sygelige tilstande der leder direkte til døden, eller ydre omstændigheder ved en ulykke eller voldshandling som var årsag til den dødelige skade. Det problematiske for sammenligneligheden er, at i nogle tilfælde, hvor der er opført to eller flere dødsårsager på dødsattesten, bliver valget af den underliggende dødsårsag forskellig fra land til land, fordi reglerne giver mulighed for forskellig fortolkning.

Udover at ICD's regler for mortalitetskodning giver plads for fortolkning kan der også være tale om udvikling af nationale traditioner for valget af den underliggende dødsårsag. Som eksempel kan nævnes brugen af diagnosegruppen "mangelfuldt definerede tilstande" (koderne I469, I959, I99; J960, J969; P285.0; R000-R948; R96-99). Anvendelsen af disse koder som underliggende dødsårsag er mere udbredt i Danmark end i de andre nordiske lande i situationer hvor der også er oplyst mere specifikke dødsårsager på dødsattesten. (Jfr. tabel 4.1.11.)

Men der er også flere andre forhold der påvirker sammenligneligheden, blandt andet hvilken type af information statistikproducenten har tilgang til, herunder kvaliteten på dette materiale (dødsattester og andre oplysninger).

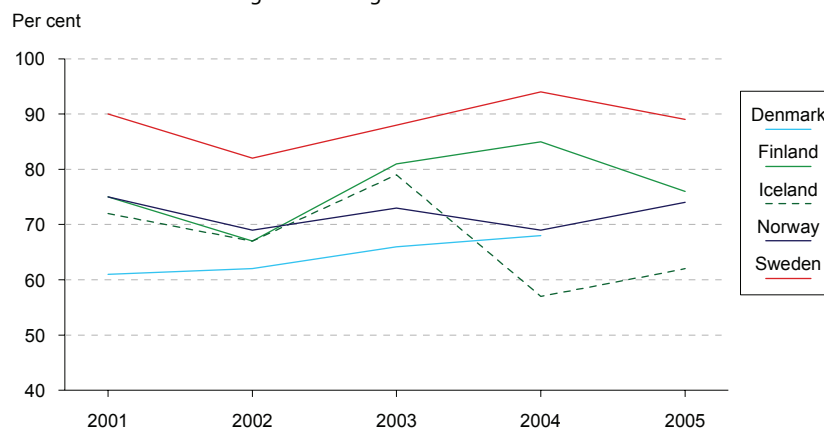
In order to support the choice of the underlying cause of death, the American programme, ACME (Automated Classification of Medical Entities) has been developed. This system is used in Sweden and the other Nordic countries are in the process of taking ACME into use. Denmark has used data from 2002, Iceland has used ACME for a few years to check manual coding, and Norway and Finland have used ACME with data for 2005. Otherwise, computer-aided coding has been used. Automatic coding does not necessarily result in a more correct picture of the pattern of causes of death than does manual coding, but it does give more consistency in the coding and thus contributes to better comparability between more countries.

Since 2001, the Nordic Classification Centre has carried out annual comparisons of how the countries classify a sample of causes of death. The sample is relatively small (200-250 death certificates per year), but the results still give an indication of how comparable the statistics are (see Figure 4.1). When making comparisons, the ACME classification system is used as the standard.

For at støtte valget af den underliggende dødsårsag, er der udviklet et amerikansk program ACME (Automated Classification of Medical Entities). Blandt de nordiske lande anvendes systemet af Sverige mens de andre nordiske lande er på vej til at anvende ACME, Danmark med data fra 2002, Island har anvendt ACME til kontrol med manuel kodning i nogle år og Norge og Finland har anvendt ACME med data fra 2005. Indtil da anvendes edb-støttet kodning. Automatisk kodning giver ikke nødvendigvis et mere korrekt billede af dødsårsagsmønsteret end manuel kodning. Derimod vil automatisk kodning give en bedre stabilitet i kodningen og dermed bidrage til en bedre sammenlignelighed mellem flere lande.

Siden 2001 har det nordiske klassifikationscenter foretaget årlige sammenligninger af hvorledes landene klassificerer et udvalg af dødsårsager. Udvalget er relativt lille (200-250 dødsattester per år) men resultatet giver dog et fingerpeg af hvorledes sammenligningen er (jfr. Nedenstående figur). Ved sammenligningen er det den klassificering som ACME systemet giver, der anvendes som standard.

**Figure 4.1 National coding compared to ACME 2001–2005**  
National kodning sammenlignet med ACME 2001–2005



Cultural differences in the reporting of certain conditions may also influence comparability. For example, if doctors in one country are far more reluctant to register suicide on the death certificate than are doctors in other countries, this can make comparisons difficult. However, in several of the Nordic countries, there are routines for contacting the doctor or the hospital in cases where the external cause of an injury is unclear. Such quality-control practices help to compensate for lack of information on the death certificate.

Kulturelle forskelle i rapporteringen af bestemte tilstande kan også påvirke sammenligneligheden. Hvis læger i et land er langt mere tilbageholdende med at anvende for eksempel selvmord på dødsattesten, end læger i andre lande, kan det vanskeliggøre sammenligneligheden. I flere af de nordiske lande findes der imidlertid rutiner for at kontakte lægen eller sygehuset i de tilfælde hvor de ydre årsager til skaden er uklare. Sådanne kvalitetssikringsrutiner er med til at kompensere for de manglende informationer på dødsattesten.

### *Autopsy rate*

Another factor influencing the quality of the statistics on causes of death is the decreasing autopsy rate (in 2003 9 per cent in Norway as the lowest and 31 per cent in Finland as the highest). The autopsy rate has been more than halved in the Nordic countries over the last few decades. Studies have shown that in about 30 per cent of cases, the result of the autopsy has caused the underlying cause of death to be altered.

### *Obduktioner*

En yderligere faktor der spiller ind på dødsårsagsstatistikens kvalitet er de faldende rater for obduktion (i 2003 9 pct. i Norge som det laveste og 31 pct. i Finland som det højeste). Anvendelsen af obduktion ved dødsfald er mere end halveret i de nordiske lande over de seneste årtier. Studier har vist, at i ca. 30 pct. af tilfældene med obduktion, har obduktionen medført at den underliggende dødsårsag er blevet ændret.

### *The reliability of the statistics    Statistikkens pålidelighed*

Considering the reservations in relation to the comparability of causes of death over time and between countries, the data presented here should be interpreted with caution. This is especially the case for small diagnostic groups in the European short list that is used in the present publication. The picture is more stable for the large groups, such as cardiovascular diseases and cancer. This also applies to alcohol and drug-related deaths, for which it is well known pattern is heterogeneous. The dramatic fall in the number of deaths from AIDS is related to new, life-prolonging medication. However, there has been a slight increase in the number of new cases in all the Nordic countries. The high incidence of cancer as an underlying cause of death in Denmark, is also partly the result of coding practice.

Falls are recoded much more often in Denmark than in Sweden. This makes comparison of death statistics for accidents unreliable. The incidence of accidents in total is highest in Finland.

For insufficiently defined conditions, the Faroe Islands, Finland, Åland and Iceland are atypical compared to the other Nordic countries, because there are only a few cases of insufficiently defined conditions.

Det er klart, at med de forbehold der er taget her over for sammenligneligheden af dødsårsagerne over tid og mellem landene, må de præsenterede data fortolkes med forsigtighed. Det vil især dreje sig om mindre diagnosegrupper i den europæiske forkortede liste, der anvendes i denne publikation. Når det drejer sig om de helt store grupper, hjerte-karsygdomme for sig og cancer for sig, tegner der sig dog et noget mere stabilt billede. Tilsvarende gælder også de alkohol og narkotikarelaterede dødsårsager hvor der er et velkendt uensartet mønster. For dødsfald ad AIDS skyldes de dramatiske fald ny livsforlængende medicin, hvor der til gengæld er en svag stigning af nye tilfælde i alle de nordiske lande. De større forekomster af cancer som underliggende dødsårsag i Danmark skyldes dog også til en vis grad kodningspraksis.

En anden forekomst er faldulykker der i langt højere grad kodes i Danmark end i Sverige og derfor er med til at gøre sammenligningen dødsårsagsstatistikken vedrørende ulykker ringe. Når det gælder alle ulykker er forekomsten størst i Finland.

For de mangelfuldt definerede tilstande er det især Færøerne, Finland, Åland og Island der adskiller sig fra de øvrige nordiske lande, fordi der kun er få tilfælde af mangelfulgt definerede tilstande.

**Table 4.1.1 Deaths by sex and age per 100 000 inhabitants 1995-2004**

Døde efter køn og alder pr. 100 000 indbyggere 1995-2004

| Age                  | Alder | Total<br>I alt |       | Under 1 year <sup>1)</sup><br>Under 1 år <sup>1)</sup> |       | 1-14 years<br>1-14 år |     | 15-24 years<br>15-24 år |     | 25-64 years<br>25-64 år |     | 65+ years<br>65+ år |       |
|----------------------|-------|----------------|-------|--------------------------------------------------------|-------|-----------------------|-----|-------------------------|-----|-------------------------|-----|---------------------|-------|
| Sex                  | Køn   | M              | W     | M                                                      | W     | M                     | W   | M                       | W   | M                       | W   | M                   | W     |
| <i>Denmark</i>       |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 1 212          | 1 203 | 557                                                    | 452   | 25                    | 17  | 79                      | 33  | 506                     | 338 | 7 114               | 5 724 |
|                      | 2000  | 1 069          | 1 099 | 607                                                    | 456   | 17                    | 12  | 79                      | 30  | 444                     | 294 | 6 368               | 5 455 |
|                      | 2003  | 1 056          | 1 081 | 499                                                    | 386   | 18                    | 13  | 61                      | 23  | 454                     | 279 | 6 143               | 5 423 |
|                      | 2004  | 1 030          | 1 038 | 459                                                    | 410   | 17                    | 14  | 62                      | 27  | 451                     | 276 | 5 934               | 5 177 |
| <i>Faroe Islands</i> |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 960            | 704   | 608                                                    | 312   | 40                    | -   | 61                      | 37  | 428                     | 181 | 6 107               | 3 873 |
|                      | 2000  | 772            | 769   | 275                                                    | -     | -                     | 39  | 60                      | 35  | 328                     | 208 | 5 054               | 4 203 |
|                      | 2003  | 843            | 854   | 273                                                    | -     | -                     | -   | 115                     | 33  | 383                     | 225 | 5 392               | 4 905 |
|                      | 2004  | 750            | 825   | -                                                      | 882   | -                     | -   | 29                      | -   | 310                     | 170 | 5 029               | 4 855 |
| <i>Greenland</i>     |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 942            | 795   | 1 805                                                  | 3 610 | 111                   | 100 | 493                     | 240 | 814                     | 430 | 9 746               | 8 188 |
|                      | 2000  | 853            | 772   | 2 138                                                  | 1 659 | 110                   | 14  | 446                     | 169 | 720                     | 529 | 7 547               | 7 552 |
|                      | 2003  | 776            | 669   | ..                                                     | ..    | 74                    | 58  | 489                     | 232 | 578                     | 423 | 7 157               | 6 410 |
| <i>Finland</i>       |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 977            | 955   | 431                                                    | 355   | 21                    | 16  | 93                      | 26  | 530                     | 218 | 6 263               | 4 752 |
|                      | 2000  | 952            | 954   | 424                                                    | 324   | 14                    | 14  | 96                      | 34  | 504                     | 222 | 5 545               | 4 606 |
|                      | 2003  | 939            | 941   | 324                                                    | 300   | 20                    | 9   | 84                      | 30  | 494                     | 210 | 5 178               | 4 477 |
|                      | 2004  | 934            | 894   | 408                                                    | 256   | 20                    | 17  | 88                      | 35  | 507                     | 225 | 4 948               | 4 123 |
| <i>Åland</i>         |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 929            | 1 125 | 649                                                    | 1 242 | 88                    | -   | 64                      | -   | 415                     | 196 | 5 012               | 5 299 |
|                      | 2000  | 852            | 1 063 | -                                                      | 885   | -                     | -   | 137                     | -   | 457                     | 202 | 4 255               | 5 035 |
|                      | 2003  | 997            | 1 041 | 1 550                                                  | -     | 43                    | 46  | -                       | -   | 293                     | 70  | 5 676               | 5 288 |
|                      | 2004  | 1 021          | 984   | 649                                                    | -     | 44                    | 92  | 130                     | -   | 486                     | 194 | 5 021               | 4 609 |
| <i>Iceland</i>       |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 733            | 705   | 717                                                    | 488   | 38                    | 47  | 85                      | 29  | 298                     | 203 | 5 493               | 4 702 |
|                      | 2000  | 644            | 653   | 456                                                    | 141   | 13                    | 10  | 120                     | 43  | 272                     | 187 | 4 591               | 4 317 |
|                      | 2003  | 623            | 640   | 285                                                    | 196   | 15                    | 10  | 41                      | 28  | 222                     | 156 | 4 680               | 4 293 |
|                      | 2004  | 656            | 590   | 276                                                    | 292   | 6                     | 20  | 82                      | 19  | 244                     | 160 | 4 850               | 3 871 |
| <i>Norway</i>        |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 1 068          | 1 006 | 491                                                    | 314   | 22                    | 16  | 86                      | 30  | 361                     | 200 | 6 393               | 4 858 |
|                      | 2000  | 974            | 985   | 427                                                    | 329   | 18                    | 15  | 93                      | 33  | 339                     | 201 | 6 052               | 4 965 |
|                      | 2003  | 909            | 952   | 370                                                    | 307   | 18                    | 15  | 77                      | 31  | 318                     | 195 | 5 760               | 4 935 |
|                      | 2004  | 880            | 917   | 343                                                    | 313   | 15                    | 16  | 81                      | 32  | 314                     | 195 | 5 530               | 4 747 |
| <i>Sweden</i>        |       |                |       |                                                        |       |                       |     |                         |     |                         |     |                     |       |
|                      | 1995  | 1 091          | 1 038 | 470                                                    | 357   | 15                    | 11  | 52                      | 26  | 347                     | 208 | 5 942               | 4 631 |
|                      | 2000  | 1 041          | 1 065 | 399                                                    | 281   | 15                    | 12  | 59                      | 24  | 305                     | 200 | 5 829               | 4 854 |
|                      | 2003  | 1 022          | 1 053 | 360                                                    | 258   | 16                    | 11  | 50                      | 27  | 300                     | 192 | 5 516               | 4 749 |
|                      | 2004  | 988            | 1 029 | 286                                                    | 272   | 12                    | 12  | 27                      | 13  | 297                     | 192 | 5 466               | 4 747 |

1 Per 100 000 live births.

1 Pr. 100 000 levendefødte.

Source: The national central statistical bureaus.

Kilde: De nationale centrale statistikbureauer.

## MORTALITY AND CAUSES OF DEATH

**Table 4.1.2 Death rates from malignant neoplasms per 100 000 by age 1996-2004**

Dødeligheden af ondartede svulster pr. 100 000 efter alder 1996-2004

|                      |         | Denmark <sup>1)</sup> | Faroe Islands <sup>2)</sup> | Greenland | Finland | Åland | Iceland <sup>3)</sup> | Norway <sup>3)</sup> | Sweden |
|----------------------|---------|-----------------------|-----------------------------|-----------|---------|-------|-----------------------|----------------------|--------|
| <i>Men Mænd</i>      |         |                       |                             |           |         |       |                       |                      |        |
| <i>Age Alder</i>     |         |                       |                             |           |         |       |                       |                      |        |
| 0-14                 | 1996-00 | 4                     | -                           | 3         | 3       | -     | 4                     | 3                    | 3      |
|                      | 2000    | 3                     | -                           | -         | 2       | -     | 3                     | 3                    | 3      |
|                      | 2004    | 4                     | 4                           | ..        | 3       | 0     | 3                     | 3                    | 3      |
| 15-34                | 1996-00 | 9                     | 6                           | 9         | 7       | 6     | 8                     | 7                    | 7      |
|                      | 2000    | 9                     | -                           | 11        | 6       | 32    | 7                     | 7                    | 8      |
|                      | 2004    | 5                     | 9                           | ..        | 4       | 19    | 5                     | 8                    | 6      |
| 35-44                | 1996-00 | 34                    | -                           | 47        | 26      | 44    | 31                    | 29                   | 23     |
|                      | 2000    | 33                    | -                           | 51        | 22      | -     | 38                    | 32                   | 20     |
|                      | 2004    | 28                    | 12                          | ..        | 23      | 0     | 23                    | 23                   | 21     |
| 45-54                | 1996-00 | 148                   | 39                          | 136       | 107     | 170   | 100                   | 120                  | 97     |
|                      | 2000    | 145                   | 32                          | 230       | 105     | 196   | 102                   | 127                  | 91     |
|                      | 2004    | 139                   | 78                          | ..        | 89      | 103   | 78                    | 94                   | 81     |
| 55-64                | 1996-00 | 471                   | 303                         | 801       | 348     | 371   | 362                   | 365                  | 305    |
|                      | 2000    | 462                   | 214                         | 985       | 320     | 471   | 227                   | 348                  | 294    |
|                      | 2004    | 435                   | 370                         | ..        | 313     | 347   | 237                   | 334                  | 281    |
| 65-74                | 1996-00 | 1 216                 | 903                         | 1 525     | 953     | 1 001 | 970                   | 1 007                | 861    |
|                      | 2000    | 1 189                 | 312                         | 1 525     | 902     | 204   | 900                   | 953                  | 826    |
|                      | 2004    | 1 173                 | 1 017                       | ..        | 810     | 910   | 774                   | 938                  | 839    |
| 75+                  | 1996-00 | 2 405                 | 2 258                       | 3 942     | 2 062   | 2 081 | 2 216                 | 2 215                | 1 947  |
|                      | 2000    | 2 440                 | 1 043                       | 3 113     | 1 947   | 1 830 | 1 888                 | 2 142                | 1 935  |
|                      | 2004    | 2 467                 | 2.139                       | ..        | 1 906   | 2 424 | 1 776                 | 2 204                | 2 015  |
| <i>Women Kvinder</i> |         |                       |                             |           |         |       |                       |                      |        |
| <i>Age Alder</i>     |         |                       |                             |           |         |       |                       |                      |        |
| 0-14                 | 1996-00 | 3                     | -                           | 5         | 3       | -     | 4                     | 3                    | 3      |
|                      | 2000    | 2                     | -                           | -         | 2       | -     | 3                     | 4                    | 3      |
|                      | 2004    | 5                     | -                           | ..        | 3       | 9     | -                     | 3                    | 2      |
| 15-34                | 1996-00 | 9                     | 11                          | 12        | 6       | 6     | 9                     | 7                    | 7      |
|                      | 2000    | 9                     | -                           | 13        | 7       | -     | 2                     | 6                    | 9      |
|                      | 2004    | 6                     | 11                          | ..        | 5       | 0     | 5                     | 7                    | 7      |
| 35-44                | 1996-00 | 48                    | 14                          | 113       | 34      | 75    | 30                    | 45                   | 24     |
|                      | 2000    | 41                    | -                           | 104       | 36      | -     | 19                    | 39                   | 21     |
|                      | 2004    | 46                    | 20                          | ..        | 29      | 21    | 37                    | 37                   | 34     |
| 45-54                | 1996-00 | 175                   | 113                         | 312       | 108     | 184   | 124                   | 141                  | 99     |
|                      | 2000    | 164                   | 36                          | 109       | 106     | 340   | 113                   | 126                  | 94     |
|                      | 2004    | 162                   | 97                          | ..        | 93      | 147   | 92                    | 112                  | 108    |
| 55-64                | 1996-00 | 440                   | 306                         | 811       | 235     | 275   | 350                   | 325                  | 303    |
|                      | 2000    | 425                   | 297                         | 542       | 237     | 150   | 396                   | 319                  | 296    |
|                      | 2004    | 422                   | 344                         | ..        | 224     | 171   | 344                   | 304                  | 274    |
| 65-74                | 1996-00 | 895                   | 698                         | 1 355     | 511     | 531   | 727                   | 605                  | 743    |
|                      | 2000    | 905                   | 589                         | 1 427     | 505     | 557   | 775                   | 600                  | 719    |
|                      | 2004    | 886                   | 611                         | ..        | 472     | 405   | 754                   | 593                  | 596    |
| 75+                  | 1996-00 | 1 433                 | 997                         | 2 302     | 1 071   | 1 198 | 1 348                 | 1 149                | 1 211  |
|                      | 2000    | 1 460                 | 685                         | 2 600     | 1 077   | 1 362 | 1 285                 | 1 184                | 1 210  |
|                      | 2004    | 1 496                 | 1 081                       | ..        | 1 015   | 994   | 1 236                 | 1 198                | 1 095  |

1 2004=2001.

2 2004=1997-2001.

3 2004=2003.

ICD-9: 140-208 and ICD-10: C00-C97

Source- The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

1 2004=2001.

2 2004=1997-2001.

3 2004=2003.

**Table 4.1.3 Death rates from circulatory diseases per 100 000 by age 1996–2004**  
Dødeligheden af kredsløbssygdomme pr. 100 000 efter alder 1996–2004

|                      |         | Denmark <sup>1)</sup> | Faroe Islands <sup>2)</sup> | Greenland | Finland | Åland | Iceland <sup>3)</sup> | Norway <sup>3)</sup> | Sweden |
|----------------------|---------|-----------------------|-----------------------------|-----------|---------|-------|-----------------------|----------------------|--------|
| <b>Men Mænd</b>      |         |                       |                             |           |         |       |                       |                      |        |
| <b>Age Alder</b>     |         |                       |                             |           |         |       |                       |                      |        |
| 0-34                 | 1996-00 | 3                     | -                           | 13        | 4       | 7     | 2                     | 3                    | 3      |
|                      | 2000    | 3                     | -                           | 6         | 5       | -     | 3                     | 3                    | 3      |
|                      | 2004    | 2                     | -                           | ..        | 3       | -     | -                     | 3                    | 2      |
| 35-44                | 1996-00 | 22                    | 6                           | 50        | 50      | 11    | 23                    | 27                   | 25     |
|                      | 2000    | 23                    | -                           | 51        | 44      | -     | 38                    | 25                   | 21     |
|                      | 2004    | 25                    | 12                          | ..        | 42      | 22    | 9                     | 21                   | 23     |
| 45-54                | 1996-00 | 76                    | 104                         | 168       | 181     | 170   | 80                    | 112                  | 105    |
|                      | 2000    | 95                    | 96                          | 179       | 184     | 98    | 113                   | 93                   | 104    |
|                      | 2004    | 103                   | 110                         | ..        | 159     | 164   | 78                    | 77                   | 83     |
| 55-64                | 1996-00 | 274                   | 367                         | 491       | 529     | 445   | 329                   | 343                  | 341    |
|                      | 2000    | 326                   | 299                         | 473       | 481     | 538   | 209                   | 282                  | 303    |
|                      | 2004    | 334                   | 370                         | ..        | 422     | 252   | 252                   | 226                  | 270    |
| 65-74                | 1996-00 | 981                   | 1 405                       | 1 875     | 1 538   | 1 105 | 1 007                 | 1 247                | 1 224  |
|                      | 2000    | 1 095                 | 1 059                       | 1 049     | 1 378   | 509   | 877                   | 1 065                | 1 101  |
|                      | 2004    | 1 115                 | 1 355                       | ..        | 1 132   | 771   | 751                   | 873                  | 938    |
| 75+                  | 1996-00 | 5 456                 | 4 875                       | 5 570     | 5 051   | 4 674 | 4 572                 | 4 928                | 5 102  |
|                      | 2000    | 4 467                 | 2 609                       | 5 058     | 4 766   | 3 791 | 3 963                 | 4 681                | 4 851  |
|                      | 2004    | 4 557                 | 4 599                       | ..        | 3 994   | 4 000 | 4 011                 | 4 137                | 4 623  |
| <b>Women Kvinder</b> |         |                       |                             |           |         |       |                       |                      |        |
| <b>Age Alder</b>     |         |                       |                             |           |         |       |                       |                      |        |
| 0-34                 | 1996-00 | 2                     | 9                           | 8         | 2       | -     | 1                     | 2                    | 2      |
|                      | 2000    | 2                     | 18                          | 7         | 3       | -     | 1                     | 2                    | 1      |
|                      | 2004    | 2                     | 6                           | ..        | 2       | -     | 1                     | 1                    | 2      |
| 35-44                | 1996-00 | 20                    | 7                           | 41        | 16      | 11    | 8                     | 10                   | 11     |
|                      | 2000    | 14                    | 33                          | 42        | 17      | -     | 10                    | 11                   | 11     |
|                      | 2004    | 15                    | 7                           | ..        | 16      | -     | 19                    | 9                    | 8      |
| 45-54                | 1996-00 | 68                    | 23                          | 91        | 42      | 31    | 28                    | 33                   | 34     |
|                      | 2000    | 41                    | -                           | 109       | 48      | -     | 24                    | 36                   | 34     |
|                      | 2004    | 39                    | 22                          | ..        | 37      | 10    | 16                    | 23                   | 34     |
| 55-64                | 1996-00 | 225                   | 74                          | 274       | 132     | 97    | 136                   | 107                  | 117    |
|                      | 2000    | 131                   | 198                         | 271       | 129     | 75    | 198                   | 102                  | 112    |
|                      | 2004    | 120                   | 94                          | ..        | 112     | 79    | 72                    | 77                   | 97     |
| 65-74                | 1996-00 | 770                   | 309                         | 1 412     | 624     | 402   | 427                   | 525                  | 522    |
|                      | 2000    | 561                   | 118                         | 1 427     | 551     | 464   | 419                   | 471                  | 469    |
|                      | 2004    | 545                   | 323                         | ..        | 405     | 313   | 293                   | 395                  | 422    |
| 75+                  | 1996-00 | 3 348                 | 3 700                       | 5 965     | 4 196   | 3 944 | 3 752                 | 3 954                | 4 157  |
|                      | 2000    | 3 722                 | 2 284                       | 8 038     | 4 090   | 3 584 | 3 421                 | 3 794                | 4 059  |
|                      | 2004    | 3 767                 | 3 824                       | ..        | 3 475   | 4 826 | 3 409                 | 3 605                | 3 906  |

1 2004=2001.

2 2004=1997-2001.

3 2004=2003.

1 2004=2001.

2 2004=1997-2001

3 2004=2003.

ICD-9: 390-459 and ICD-10: I00-I99

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

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**Figure 4.1.2 Deaths per 100 000 inhabitants by sex 1995–2004**

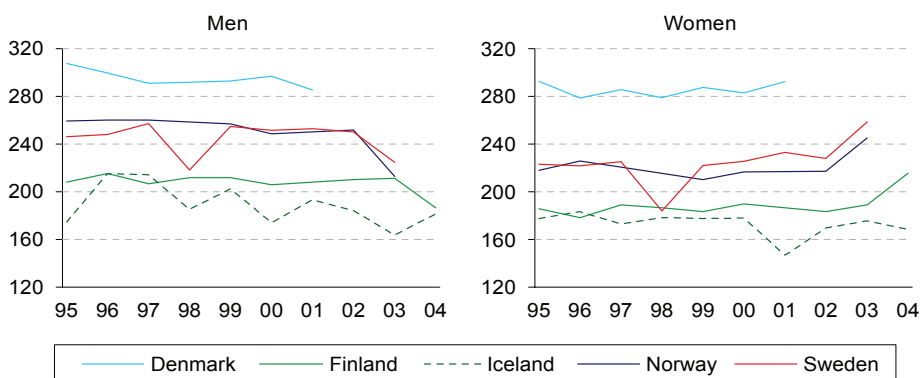
Døde pr. 100 000 indbyggere efter køn 1995–2004



Source: Table 4.4.1  
Kilde: Tabel 4.4.1

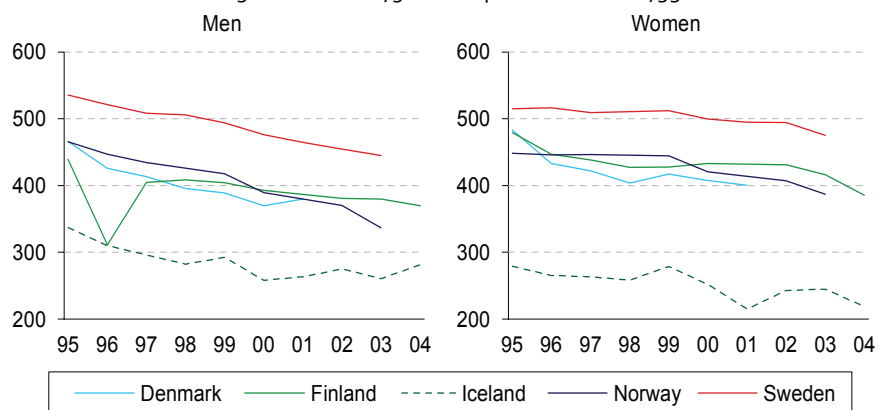
**Figure 4.1.3 Deaths from malignant neoplasms per 100 000 inhabitants by sex 1995–2004**

Døde som følge af ondartede svulster pr. 100 000 indbyggere efter køn 1995–2004



**Figure 4.1.4 Deaths from circulatory diseases per 100 000 inhabitants by sex 1995-2004**

Døde som følge af kredsløbsygdomme pr. 100 000 indbyggere efter køn 1995-2004



**Table 4.1.4 Deaths from avoidable causes per 100 000 inhabitants**

Undgåelige dødsfald pr. 100 000 indbyggere

| ICD10 codes         |                                                           | Denmark | Faroe Islands | Greenland | Finland | Åland   | Iceland | Norway | Sweden |
|---------------------|-----------------------------------------------------------|---------|---------------|-----------|---------|---------|---------|--------|--------|
|                     |                                                           | 2001    | 1997-01       | 2000      | 2004    | 2000-04 | 2003    | 2003   | 2003   |
| Age                 |                                                           |         |               |           |         |         |         |        |        |
| Alder               |                                                           |         |               |           |         |         |         |        |        |
| C15                 | 0-74 Malignant neoplasm of the oesophagus                 |         |               |           |         |         |         |        |        |
|                     | Kræft i spiserør                                          | 5.4     | 5.2           | 7.2       | 2.5     | 2.5     | 2.2     | 2.2    | 2.7    |
| C32-<br>C34         | 0-74 Malignant neoplasm of the trachea, bronchus and lung |         |               |           |         |         |         |        |        |
|                     | Kræft i lunger, bronkie og lunge                          | 45.4    | 25.7          | 57.6      | 23.3    | 19.2    | 25.6    | 29.0   | 24.2   |
| C53                 | 0-74 Malignant neoplasm of cervix uteri <sup>1)</sup>     |         |               |           |         |         |         |        |        |
|                     | Kræft i livmoderhalsen <sup>1)</sup>                      | 3.8     | 7.0           | 11.6      | 1.2     | 0.0     | 3.0     | 3.2    | 1.9    |
| E10-<br>E14         | 0-74 Diabetes mellitus                                    |         |               |           |         |         |         |        |        |
|                     | Sukkersyge                                                | 10.9    | 8.6           | 3.6       | 5.2     | 6.7     | 2.9     | 5.2    | 6.8    |
| I60-<br>I69         | 0-74 Cerebrovascular diseases                             |         |               |           |         |         |         |        |        |
|                     | Sygdom i hjernen                                          | 24.1    | 20.0          | 32.4      | 25.0    | 10.0    | 10.6    | 15.7   | 18.9   |
| J40-<br>J44         | 0-74 Obstructive lung diseases                            |         |               |           |         |         |         |        |        |
|                     | Rygerlunger                                               | 25.8    | ..            | ..        | 7.7     | 13.4    | 7.7     | 10.6   | 9.3    |
| J45-<br>J46         | 0-14 Asthma                                               |         |               |           |         |         |         |        |        |
|                     | Astma                                                     | 0.0     | 0.0           | 0.0       | 0.0     | 0.8     | 0.0     | 0.0    | 0.0    |
| K70;<br>K73-<br>K74 | 0-74 Chronic liver disease and cirrhosis                  |         |               |           |         |         |         |        |        |
|                     | Kronisk leversygdom og skrumpelever                       | 15.1    | 5.7           | 5.4       | 18.5    | 8.4     | 1.1     | 4.5    | 6.1    |

1 Per 100 000 women.

1 Pr. 100 000 kvinder.

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

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**Table 4.1.5 Deaths from HIV/AIDS, in total and per 100 000 inhabitants 1996-2004**

Dødsfald som følge af HIV/AIDS, i alt og pr. 100 000 indbyggere 1996-2004

|                                | Denmark           | Faroe Islands     | Greenland | Finland | Åland | Iceland | Norway | Sweden |
|--------------------------------|-------------------|-------------------|-----------|---------|-------|---------|--------|--------|
| <i>Number</i>                  |                   |                   |           |         |       |         |        |        |
| Antal                          |                   |                   |           |         |       |         |        |        |
| 1996-00                        | 63                | 0 <sup>2)</sup>   | 4         | 12      | -     | 1       | 25     | 39     |
| 2000                           | 21                | ..                | 5         | 10      | -     | 1       | 15     | 13     |
| 2003                           | 34 <sup>1)</sup>  | ..                | -         | 8       | -     | -       | 16     | 29     |
| 2004                           | ..                | ..                | ..        | 8       | -     | -       | ..     | ..     |
| <i>Per 100 000 inhabitants</i> |                   |                   |           |         |       |         |        |        |
| Pr. 100 000 indbyggere         |                   |                   |           |         |       |         |        |        |
| 1996-00                        | 1.0               | 0.0 <sup>2)</sup> | 7.1       | 0.2     | -     | 0.3     | 0.6    | 0.4    |
| 2000                           | 0.4               | ..                | 8.9       | 0.2     | -     | 0.4     | 0.3    | 0.1    |
| 2003                           | 0.6 <sup>1)</sup> | ..                | -         | 0.2     | -     | -       | 0.3    | 0.3    |
| 2004                           | ..                | ..                | ..        | 0.2     | -     | -       | ..     | ..     |

ICD-10: B20-B24

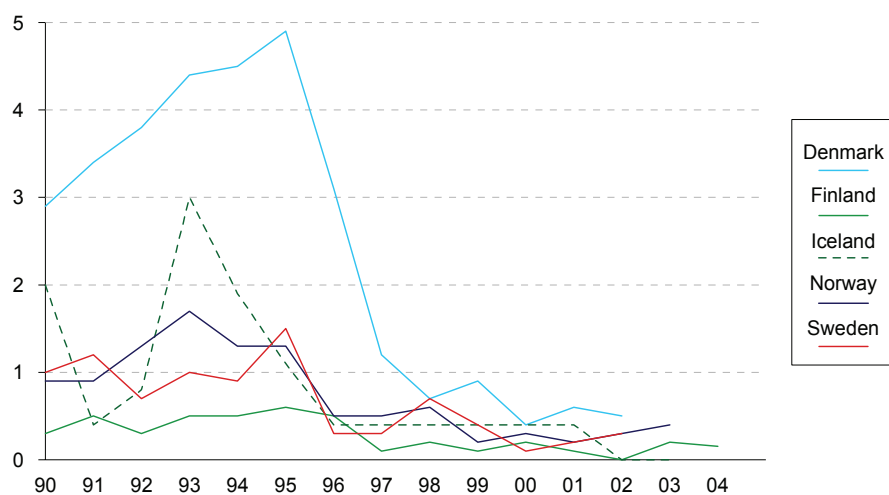
1 2001  
2 1997-2001

1 2001  
2 1997-2001

Sources: The national registers for causes of death  
Kilder: De nationale dødsårsagsregistre

**Figure 4.1.5 Deaths from HIV/AIDS per 100 000 inhabitants 1990-2004**

Døde som følge af HIV/AIDS pr. 100 000 indbyggere 1990-2004



Sources: Table 4.1.5  
Kilder: Tabel 4.1.5

**Table 4.1.6 Deaths from suicide per 100 000 inhabitants by sex and age 1995-2004**  
 Selvmord pr. 100 000 indbyggere efter køn og alder 1995-2004

|                             | Men                    |       |       |       |       | Women                  |       |       |       |      |
|-----------------------------|------------------------|-------|-------|-------|-------|------------------------|-------|-------|-------|------|
|                             | <i>Total<br/>I alt</i> | 10-19 | 20-24 | 25-64 | 65+   | <i>Total<br/>I alt</i> | 10-19 | 20-24 | 25-64 | 65+  |
| Denmark                     |                        |       |       |       |       |                        |       |       |       |      |
| 1995                        | 27.7                   | 5.3   | 16.7  | 29.1  | 48.9  | 12.7                   | 0.7   | 3.3   | 12.5  | 24.6 |
| 1999                        | 24.7                   | 5.4   | 15.2  | 25.7  | 42.4  | 8.4                    | 0.4   | 3.5   | 8.5   | 14.9 |
| 2000                        | 23.3                   | 4.4   | 16.0  | 23.8  | 41.8  | 8.3                    | 2.5   | 1.2   | 8.2   | 15.0 |
| 2001                        | 19.2                   | 5.7   | 13.9  | 22.5  | 39.6  | 8.1                    | 0.7   | 3.1   | 8.8   | 18.5 |
| Faroe Islands <sup>1)</sup> |                        |       |       |       |       |                        |       |       |       |      |
| 1996-00                     | 5.2                    | 11.3  | -     | 6.8   | -     | 2.8                    | -     | -     | 5.9   | -    |
| 1997-01                     | 3.5                    | 11.3  | -     | 3.4   | -     | 1.8                    | -     | -     | 3.9   | -    |
| Greenland                   |                        |       |       |       |       |                        |       |       |       |      |
| 1996-00                     | 171.6                  | 199.4 | 427.1 | 146.8 | 68.1  | 53.7                   | 41.7  | 47.5  | 47.4  | 34.0 |
| 2000-04                     | 145.3                  | 179.3 | 463.8 | 105.4 | 101.6 | 57.6                   | 70.5  | 103.8 | 52.7  | 12.6 |
| Finland                     |                        |       |       |       |       |                        |       |       |       |      |
| 1995                        | 43.4                   | 13.1  | 48.9  | 58.5  | 53.3  | 11.8                   | 1.9   | 13.5  | 16.7  | 17.5 |
| 2000                        | 34.6                   | 10.5  | 41.8  | 46.6  | 36.8  | 11.0                   | 4.1   | 9.4   | 15.5  | 17.5 |
| 2003                        | 31.9                   | 12.3  | 35.1  | 41.3  | 38.8  | 9.8                    | 3.5   | 11.2  | 13.0  | 17.5 |
| 2004                        | 31.7                   | 10.0  | 47.7  | 39.1  | 42.3  | 9.4                    | 4.1   | 11.7  | 12.7  | 8.3  |
| Åland                       |                        |       |       |       |       |                        |       |       |       |      |
| 1996-00                     | 30.4                   | 12.8  | 26.9  | 37.8  | 47.1  | 12.3                   | -     | -     | 14.7  | 24.4 |
| 2000-04                     | 26.5                   | 12.0  | 55.8  | 33.8  | 22.2  | 9.1                    | -     | -     | 8.5   | 24.1 |
| Iceland                     |                        |       |       |       |       |                        |       |       |       |      |
| 1995                        | 16.4                   | 9.3   | 18.9  | 24.3  | 14.8  | 3.7                    | -     | -     | 4.7   | 12.1 |
| 1999                        | 17.3                   | 4.6   | 28.6  | 27.3  | 7.0   | 5.1                    | 4.8   | 9.7   | 5.9   | 5.7  |
| 2000                        | 29.8                   | 22.9  | 73.4  | 38.1  | 13.6  | 5.7                    | -     | 9.4   | 8.6   | 5.6  |
| 2003                        | 13.8                   | 4.5   | 35.2  | 18.9  | 6.5   | 4.2                    | -     | -     | 8.3   | -    |
| Norway                      |                        |       |       |       |       |                        |       |       |       |      |
| 1995                        | 19.1                   | 12.9  | 24.6  | 22.4  | 28.8  | 6.2                    | 3.9   | 5.1   | 8.1   | 7.4  |
| 1999                        | 19.5                   | 10.1  | 36.4  | 23.4  | 25.6  | 6.8                    | 6.4   | 5.8   | 8.6   | 7.5  |
| 2000                        | 18.4                   | 11.3  | 29.9  | 22.5  | 22.6  | 5.8                    | 3.0   | 4.4   | 7.9   | 6.3  |
| 2003                        | 16.6                   | 9.0   | 25.8  | 20.9  | 18.8  | 5.6                    | 3.9   | 6.7   | 7.3   | 5.4  |
| Sweden                      |                        |       |       |       |       |                        |       |       |       |      |
| 1995                        | 21.5                   | 5.8   | 16.2  | 27.4  | 35.1  | 9.3                    | 2.0   | 6.6   | 11.5  | 14.2 |
| 1999                        | 19.7                   | 5.9   | 18.3  | 23.5  | 35.0  | 8.0                    | 2.5   | 7.4   | 10.3  | 10.3 |
| 2000                        | 18.3                   | 4.0   | 15.9  | 21.2  | 36.0  | 7.3                    | 3.2   | 3.9   | 9.2   | 10.1 |
| 2003                        | 17.5                   | 3.7   | 14.8  | 21.5  | 29.8  | 7.4                    | 2.5   | 9.0   | 9.2   | 9.2  |

1 The total covers both men and women.

1 Totalen dækker både mænd og kvinder.

Source: *The national registers for causes of death*

Kilde: De nationale dødsårsagsregistre

G: Chief Medical Officer

ICD-9: E950-E959 and ICD-10: X60-X84

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**Table 4.1.7 Deaths from accidents per 100 000 inhabitants by sex and age 1995–2004**  
Dødsfald som følge af ulykker pr. 100 000 indbyggere efter køn og alder  
1995–2004

|               | Men            |      |       |       |       |       | Women          |      |       |       |       |       |
|---------------|----------------|------|-------|-------|-------|-------|----------------|------|-------|-------|-------|-------|
|               | Total<br>I alt | 0-14 | 15-24 | 25-64 | 65-79 | 80+   | Total<br>I alt | 0-14 | 15-24 | 25-64 | 65-79 | 80+   |
| Denmark       |                |      |       |       |       |       |                |      |       |       |       |       |
| 1995          | 51.2           | 7.3  | 42.7  | 33.2  | 102.6 | 578.0 | 43.3           | 3.4  | 8.5   | 12.8  | 42.0  | 327.9 |
| 2000          | 45.3           | 6.3  | 37.7  | 30.2  | 80.2  | 544.7 | 43.6           | 2.9  | 10.3  | 11.3  | 64.2  | 525.9 |
| 2001          | 42.9           | 4.9  | 32.2  | 32.0  | 76.8  | 467.6 | 34.8           | 2.3  | 8.1   | 9.6   | 54.4  | 414.6 |
| Faroe Islands |                |      |       |       |       |       |                |      |       |       |       |       |
| 1997-01       | 44.0           | 7.4  | 72.1  | 29.1  | 64.4  | 479.4 | 25.8           | 7.7  | 7.2   | 3.9   | 88.4  | 257.7 |
| Greenland     |                |      |       |       |       |       |                |      |       |       |       |       |
| 1996-00       | 94.3           | 51.3 | 71.9  | 105.2 | ..    | ..    | 29.9           | 13.2 | 35.6  | 27.7  | ..    | ..    |
| 2000          | 86.6           | 39.1 | 0.0   | 87.0  | 659.0 | -     | 45.8           | 26.7 | 84.2  | 44.1  | -     | 510.2 |
| Finland       |                |      |       |       |       |       |                |      |       |       |       |       |
| 1995          | 72.6           | 7.0  | 33.2  | 81.7  | 155.6 | 386.6 | 32.0           | 3.6  | 7.4   | 16.3  | 33.9  | 235.5 |
| 2000          | 70.8           | 6.0  | 30.8  | 75.6  | 137.1 | 471.2 | 34.4           | 3.0  | 9.3   | 18.9  | 53.2  | 310.8 |
| 2003          | 72.0           | 6.4  | 31.6  | 73.8  | 137.8 | 531.8 | 35.1           | 2.7  | 9.1   | 17.4  | 59.6  | 319.1 |
| 2004          | 75.9           | 9.4  | 33.1  | 78.7  | 155.4 | 429.4 | 39.9           | 7.3  | 11.6  | 24.8  | 60.6  | 302.8 |
| Åland         |                |      |       |       |       |       |                |      |       |       |       |       |
| 1996-00       | 59.6           | 4.1  | 19.2  | 62.1  |       |       | 21.0           | -    | 7.0   | 10.5  |       |       |
| 2000-04       | 42.0           | 16.3 | 13.4  | 42.2  | 57.8  | 237.3 | 24.2           | 8.6  | -     | 11.3  | 24.8  | 204.5 |
| Iceland       |                |      |       |       |       |       |                |      |       |       |       |       |
| 1995          | 51.5           | 26.9 | 47.0  | 56.3  | 74.0  | 186.1 | 35.2           | 34.6 | 14.6  | 31.1  | 65.4  | 115.5 |
| 2000          | 38.4           | 3.0  | 46.0  | 36.7  | 76.6  | 274.6 | 12.8           | -    | 23.7  | 10.1  | 30.2  | 21.5  |
| 2002          | 27.8           | 5.9  | 18.5  | 27.3  | 67.4  | 186.9 | 20.9           | 15.4 | 14.2  | 15.3  | 29.7  | 141.3 |
| 2003          | 27.6           | 8.9  | 18.3  | 28.4  | 50.1  | 179.7 | 19.4           | 0.0  | 19.0  | 5.5   | 59.4  | 232.9 |
| Norway        |                |      |       |       |       |       |                |      |       |       |       |       |
| 1995          | 44.7           | 7.3  | 38.3  | 30.9  | 82.1  | 478.5 | 31.8           | 3.6  | 9.7   | 7.9   | 48.0  | 368.0 |
| 1999          | 44.4           | 7.0  | 37.3  | 26.8  | 98.2  | 505.6 | 33.2           | 4.2  | 7.8   | 8.2   | 43.0  | 437.4 |
| 2000          | 43.9           | 4.8  | 35.4  | 31.8  | 81.0  | 442.9 | 34.2           | 5.0  | 9.4   | 8.1   | 44.6  | 381.3 |
| 2003          | 48.4           | 4.9  | 34.9  | 40.4  | 86.6  | 417.9 | 33.1           | 3.2  | 9.0   | 12.3  | 37.3  | 349.2 |
| Sweden        |                |      |       |       |       |       |                |      |       |       |       |       |
| 1995          | 33.0           | 4.8  | 21.0  | 24.3  | 58.5  | 295.0 | 22.2           | 3.4  | 6.0   | 6.7   | 16.1  | 143.9 |
| 1999          | 33.1           | 4.5  | 17.1  | 23.1  | 62.5  | 306.5 | 23.5           | 3.0  | 6.0   | 6.1   | 33.3  | 233.7 |
| 2000          | 36.2           | 3.1  | 27.1  | 25.5  | 66.9  | 310.0 | 22.7           | 1.6  | 6.4   | 6.5   | 28.4  | 227.4 |
| 2003          | 39.1           | 4.0  | 22.3  | 27.8  | 66.2  | 347.0 | 26.7           | 1.5  | 7.9   | 7.2   | 28.5  | 270.4 |

Source: The national registers for causes of death

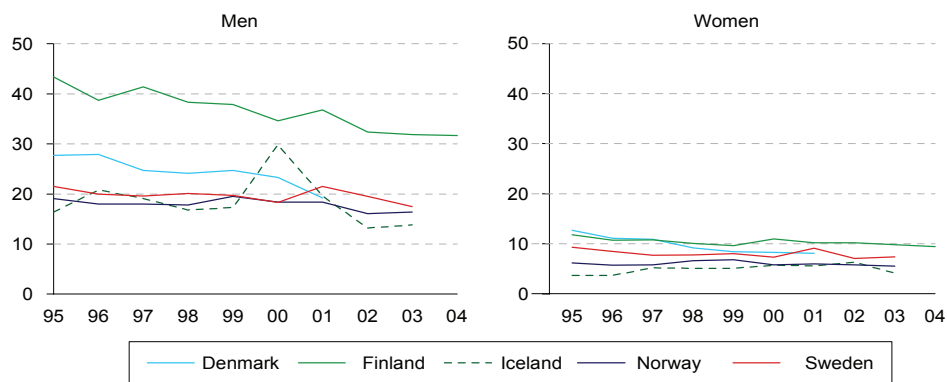
ICD-9: E800-E929 and ICD-10: V01-X59.

Kilde: De nationale dødsårsagsregistre

G: Chief Medical Officer

**Figure 4.1.6 Deaths from suicide per 100 000 inhabitants by sex 1995-2004**

Døde som følge af selvmord pr. 100 000 indbyggere efter køn 1995-2004

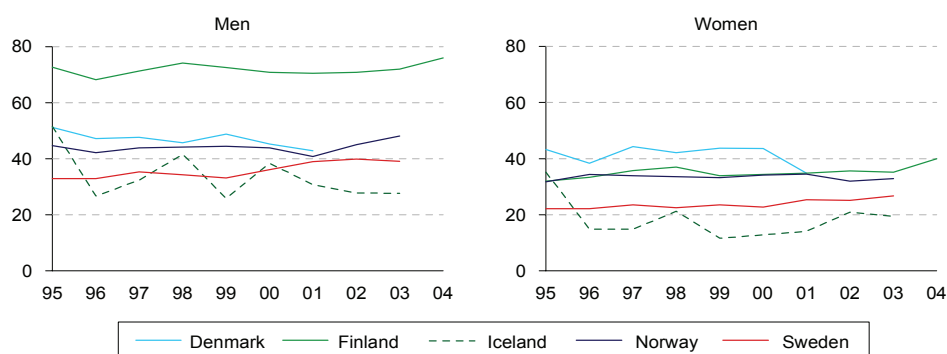


Sources: Table 4.1.6

Kilder: Tabel 4.1.6

**Figure 4.1.7 Deaths from accidents per 100 000 inhabitants by sex 1995-2004**

Døde som følge af ulykker pr. 100 000 indbyggere efter køn 1995-2004



Sources: Table 4.1.7

Kilder: Tabel 4.1.7

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**Table 4.1.8 Deaths from land transport accidents per 100 000 inhabitants by sex and age**  
Dødsfald i landtransportulykker pr. 100 000 indbyggere efter køn og alder

|               | Men                    |      |       |       |      | Women                  |      |       |       |      |
|---------------|------------------------|------|-------|-------|------|------------------------|------|-------|-------|------|
|               | <i>Total<br/>I alt</i> | 0-14 | 15-24 | 25-64 | 65+  | <i>Total<br/>I alt</i> | 0-14 | 15-24 | 25-64 | 65+  |
| Denmark       |                        |      |       |       |      |                        |      |       |       |      |
| 2001          | 12.2                   | 2.7  | 24.1  | 11.2  | 20.5 | 4.5                    | 1.7  | 6.7   | 3.6   | 9.1  |
| Faroe Islands |                        |      |       |       |      |                        |      |       |       |      |
| 1997-01       | 12.1                   | 3.7  | 66.1  | 1.7   | 7.4  | 6.5                    | 3.8  | 7.2   | 3.9   | 17.5 |
| Finland       |                        |      |       |       |      |                        |      |       |       |      |
| 1995          | 14.0                   | 3.8  | 19.5  | 12.2  | 35.1 | 5.0                    | 2.1  | 5.8   | 3.8   | 10.9 |
| 2000          | 11.3                   | 2.3  | 13.3  | 11.4  | 24.0 | 5.1                    | 2.2  | 5.6   | 4.1   | 10.7 |
| 2003          | 11.7                   | 4.5  | 15.0  | 11.1  | 21.5 | 4.8                    | 1.8  | 6.0   | 3.3   | 11.0 |
| 2004          | 11.2                   | 1.9  | 20.4  | 9.7   | 21.5 | 5.0                    | 1.3  | 7.9   | 3.6   | 10.5 |
| Åland         |                        |      |       |       |      |                        |      |       |       |      |
| 1996-00       | 9.8                    | -    | 12.3  | 9.0   | 24.6 | 3.1                    | -    | -     | -     | 16.2 |
| 2000-04       | 10.9                   | -    | 13.4  | 14.1  | 11.1 | 4.5                    | -    | -     | 2.8   | 16.0 |
| Iceland       |                        |      |       |       |      |                        |      |       |       |      |
| 1995          | 14.9                   | 9.0  | 23.5  | 13.7  | 22.2 | 7.5                    | 3.1  | 4.9   | 10.9  | 6.0  |
| 2000          | 16.3                   | 0.0  | 32.2  | 16.9  | 27.3 | 7.1                    | 0.0  | 19.0  | 5.8   | 11.2 |
| 2002          | 9.7                    | 3.0  | 13.9  | 10.9  | 13.3 | 10.4                   | 12.3 | 4.7   | 8.4   | 21.7 |
| 2003          | 13.1                   | 6.0  | 9.2   | 13.5  | 32.6 | 4.2                    | -    | 9.5   | 2.8   | 10.7 |
| Norway        |                        |      |       |       |      |                        |      |       |       |      |
| 1995          | 11.6                   | 3.4  | 26.0  | 8.8   | 19.8 | 4.7                    | 1.5  | 7.3   | 3.0   | 10.6 |
| 2000          | 12.5                   | 2.6  | 26.4  | 12.2  | 16.3 | 4.6                    | 2.5  | 7.9   | 3.4   | 8.3  |
| 2002          | 11.8                   | 1.7  | 24.1  | 11.6  | 17.4 | 3.5                    | 1.6  | 4.5   | 3.0   | 6.1  |
| 2003          | 11.9                   | 3.2  | 19.6  | 11.9  | 18.8 | 3.7                    | 1.8  | 4.5   | 3.0   | 7.1  |
| Sweden        |                        |      |       |       |      |                        |      |       |       |      |
| 2002          | 9.7                    | 1.8  | 16.9  | 9.7   | 13.5 | 3.0                    | 0.5  | 5.3   | 2.5   | 5.3  |
| 2003          | 8.6                    | 1.5  | 15.1  | 8.8   | 11.8 | 2.9                    | 0.9  | 6.2   | 2.3   | 4.1  |

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

G: Chief Medical Officer

ICD9: E800-E829; ICD-10: V01-V89

**Table 4.1.9 Deaths from alcohol-related causes per 100 000 inhabitants**

Alkoholrelaterede dødsårsager per 100 000 indbyggere

|              | Denmark | Faroe Islands | Finland | Åland   | Iceland | Norway | Sweden |
|--------------|---------|---------------|---------|---------|---------|--------|--------|
| Year         | 2001    | 1997-01       | 2004    | 2000-04 | 2003    | 2003   | 2003   |
| <i>Men</i>   |         |               |         |         |         |        |        |
| Mænd         |         |               |         |         |         |        |        |
| 0-34         | 0.7     | 0.0           | 3.5     | 0.0     | 0.0     | 0.4    | 0.6    |
| 35-44        | 28.6    | 0.0           | 56.5    | 32.4    | 0.0     | 8.8    | 6.5    |
| 45-64        | 87.2    | 3.6           | 134.8   | 60.8    | 9.4     | 32.4   | 38.3   |
| 65-74        | 100.5   | 0.4           | 99.0    | 39.6    | 11.4    | 44.5   | 45.9   |
| 75+          | 38.0    | 0.0           | 37.1    | 25.2    | 0.0     | 25.1   | 14.3   |
| Total        | 37.0    | 4.0           | 57.8    | 26.5    | 2.8     | 13.9   | 15.9   |
| <i>Women</i> |         |               |         |         |         |        |        |
| Kvinder      |         |               |         |         |         |        |        |
| 0-34         | 0.2     | 0.0           | 0.4     | -       | -       | -      | 2.3    |
| 35-44        | 9.7     | 0.2           | 12.9    | -       | 4.7     | 2.7    | 11.3   |
| 45-64        | 32.7    | 0.4           | 36.1    | 22.5    | -       | 13.2   | 9.2    |
| 65-74        | 20.3    | 0.0           | 21.2    | 36.8    | -       | 9.9    | 1.9    |
| 75+          | 13.3    | 0.0           | 7.2     | 14.2    | -       | 1.8    | 4.2    |
| Total        | 12.7    | 0.6           | 14.4    | 10.6    | 0.7     | 4.4    | 2.3    |
| <i>M+W</i>   |         |               |         |         |         |        |        |
| M+K          |         |               |         |         |         |        |        |
| 0-34         | 0.5     | 0.0           | 1.9     | -       | -       | 0.2    | 0.3    |
| 35-44        | 19.3    | 0.2           | 35.0    | 16.0    | 2.3     | 5.8    | 4.5    |
| 45-64        | 60.0    | 4.0           | 85.3    | 41.8    | 4.8     | 22.9   | 24.9   |
| 65-74        | 57.7    | 0.4           | 56.3    | 38.1    | 5.5     | 26.1   | 26.5   |
| 75+          | 22.4    | 0.0           | 17.1    | 18.2    | -       | 10.5   | 6.7    |
| Total        | 24.7    | 4.6           | 35.7    | 18.4    | 1.7     | 9.2    | 10.0   |

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

ICD-10: E244, F10, G312, G621, G721, I426, K292, K700-709, K860, O354, P043, Q860, Y15, X45

## MORTALITY AND CAUSES OF DEATH

**Table 4.1.10 Deaths from drug-related causes per 100 000 inhabitants**

Misbrugsrelaterede dødsfald per 100 000 indbyggere

|              | Denmark | Faroe Islands | Finland | Åland   | Iceland | Norway | Sweden |
|--------------|---------|---------------|---------|---------|---------|--------|--------|
| Year         | 2001    | 1997-01       | 2004    | 2000-04 | 2003    | 2003   | 2003   |
| <i>Men</i>   |         |               |         |         |         |        |        |
| Mænd         |         |               |         |         |         |        |        |
| 0-34         | 7.2     | 1.7           | 2.5     | 7.2     | 2.6     | 10.2   | 5.6    |
| 35-44        | 25.2    | 6.2           | 4.2     | 10.8    | 0.0     | 24.2   | 17.9   |
| 45-64        | 15.6    | 7.5           | 2.2     | 5.5     | 25.2    | 19.3   | 17.7   |
| 65-74        | 9.8     | 0.0           | -       | -       | 11.4    | 7.3    | 12.8   |
| 75+          | 13.6    | 0.0           | -       | -       | -       | 6.8    | 11.0   |
| Total        | 12.7    | 3.4           | 2.3     | 6.2     | 7.6     | 14.2   | 11.5   |
| <i>Women</i> |         |               |         |         |         |        |        |
| Kvinder      |         |               |         |         |         |        |        |
| 0-34         | 2.2     | -             | 0.3     | -       | 2.7     | 3.8    | 2.8    |
| 35-44        | 9.5     | -             | 2.7     | -       | 4.7     | 8.8    | 6.2    |
| 45-64        | 12.3    | -             | 1.4     | 5.6     | 9.7     | 11.0   | 9.8    |
| 65-74        | 9.9     | -             | 1.6     | -       | 10.5    | 7.0    | 5.6    |
| 75+          | 9.2     | -             | -       | -       | -       | 2.7    | 6.2    |
| Total        | 7.1     | -             | 1.0     | 1.5     | 4.8     | 6.3    | 5.6    |
| <i>M+W</i>   |         |               |         |         |         |        |        |
| M+K          |         |               |         |         |         |        |        |
| 0-34         | 4.8     | 0.9           | 1.4     | 3.7     | 2.7     | 7.1    | 4.2    |
| 35-44        | 17.5    | 3.2           | 3.5     | 5.3     | 2.3     | 16.7   | 12.2   |
| 45-64        | 14.0    | 4.0           | 1.8     | 5.6     | 17.5    | 15.2   | 13.8   |
| 65-74        | 9.9     | 0.0           | 0.9     | -       | 10.9    | 7.2    | 9.0    |
| 75+          | 10.8    | 0.0           | -       | -       | -       | 4.3    | 8.1    |
| Total        | 9.9     | 1.8           | 1.7     | 3.8     | 6.2     | 10.2   | 8.6    |

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

ICD-10: ICD-10: F11-F16, F18-F19, O35.5, P04.4, X40-X49, X60-X69, Y10-Y19, T40.0-T40.3, T40.5-T40.9, T43.6

**Table 4.1.11 Deaths from incompletely defined causes on the deaths certificate per 100 000 inhabitants**

Dødsfald af personer med dødsattester der har mangelfuldt definerede tilstande per 100 000 indbyggere

|                                     | Denmark | Faroe Islands | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------------|---------|---------------|---------|-------|---------|--------|--------|
| Year                                | 2001    | 1997-01       | 2004    | 2004  | 2003    | 2003   | 2003   |
| <i>Men Mænd</i>                     |         |               |         |       |         |        |        |
| 0-44                                | 0.3     | 1.3           | 0.2     | -     | 0.0     | 0.6    | 0.1    |
| 45-64                               | 12.3    | 3.8           | 0.4     | -     | 0.0     | 9.5    | 0.3    |
| 65-74                               | 48.2    | 25.1          | 2.0     | -     | 11.4    | 13.9   | 5.1    |
| 75+                                 | 176.2   | 107.0         | 4.8     | 25.0  | 45.9    | 146.7  | 141.9  |
| Total                               | 16.1    | 8.6           | 0.6     | 1.6   | 2.8     | 12.2   | 10.4   |
| <i>No death certificate, number</i> |         |               |         |       |         |        |        |
| Uden dødsattest, antal              | 117     | -             | 84      | 2     | -       | 354    | 413    |
| <i>Women Kvinder</i>                |         |               |         |       |         |        |        |
| 0-44                                | 0.1     | 0.0           | 0.1     | -     | 0.0     | 0.2    | 0.0    |
| 45-64                               | 4.2     | 4.3           | 0.1     | -     | 0.0     | 1.6    | 0.4    |
| 65-74                               | 21.7    | 11.5          | 0.0     | -     | 0.0     | 6.4    | 2.5    |
| 75+                                 | 201.5   | 142.7         | 6.0     | 42.6  | 44.1    | 240.4  | 292.7  |
| Total                               | 20.7    | 12.9          | 0.6     | 4.5   | 2.8     | 24.1   | 31.8   |
| <i>No death certificate, number</i> |         |               |         |       |         |        |        |
| Uden dødsattest, antal              | 103     | -             | 51      | 5     | -       | 240    | 308    |
| <i>M+W M+K</i>                      |         |               |         |       |         |        |        |
| 0-44                                | 0.2     | 0.7           | 0.1     | -     | 0.0     | 0.4    | 0.1    |
| 45-64                               | 8.3     | 4.0           | 0.3     | -     | 0.0     | 5.6    | 0.4    |
| 65-74                               | 34.0    | 18.0          | 0.9     | -     | 5.5     | 9.9    | 3.8    |
| 75+                                 | 192.2   | 128.4         | 5.6     | 36.3  | 44.9    | 205.5  | 234.2  |
| Total                               | 18.4    | 10.7          | 0.6     | 3.1   | 2.8     | 18.2   | 21.2   |
| <i>No death certificate, number</i> |         |               |         |       |         |        |        |
| Uden dødsattest, antal              | 220     | -             | 135     | 7     | -       | 594    | 721    |

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

ICD-10: I469, I959, I99, J960, J969, P285.0, R000-R948, R99

**Table 4.1.12 Autopsy rates as a percentage of all deaths**

Obduktionsrater i procent af alle døde

|                               | Denmark | Faroe Islands | Finland | Åland | Iceland | Norway | Sweden |
|-------------------------------|---------|---------------|---------|-------|---------|--------|--------|
| <i>Medico legal autopsies</i> |         |               |         |       |         |        |        |
| Retsmedicinske obduktioner    |         |               |         |       |         |        |        |
| 1995                          | 2       | 7             | 19      | 10    | ..      | ..     | 5      |
| 2000                          | 2       | 3             | 21      | 9     | 12      | 4      | 5      |
| 2001                          | 2       | 2             | 21      | 9     | 11      | 4      | 5      |
| 2002                          | ..      | 8             | 21      | 9     | 10      | 4      | 5      |
| 2003                          | ..      | 4             | 22      | 10    | 9       | 4      | 5      |
| <i>Other autopsies</i>        |         |               |         |       |         |        |        |
| Andre obduktioner             |         |               |         |       |         |        |        |
| 1995                          | 10      | ..            | 12      | 9     | ..      | ..     | 13     |
| 2000                          | 7       | ..            | 10      | 9     | 7       | 6      | 9      |
| 2001                          | 7       | ..            | 9       | 15    | 7       | 6      | 9      |
| 2002                          | ..      | ..            | 9       | 9     | 5       | 6      | 8      |
| 2003                          | ..      | ..            | 9       | 8     | 5       | 5      | 8      |

Source: The national registers for causes of death

Kilde: De nationale dødsårsagsregistre

ICD-10: R00-R94+ R 99 and J96.0-J96.9

## CHAPTER V

# Resources

## *Ressourcer*

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| • <a href="#">Health care expenditures</a>           | • <a href="#">Sundhedsudgifter</a>                      | 213 |
| • <a href="#">Health care personel</a>               | • <a href="#">Sundhedspersonale</a>                     | 223 |
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| <b>Extra Materials</b>                               | <b>Supplerende Materiale</b>                            |     |
| OECD:                                                |                                                         |     |
| <a href="http://www.oecd.org">www.oecd.org</a>       |                                                         |     |

## Introduction

This chapter describes available resources and utilization of resources in the health sector. It begins with an overview of total health care expenditure, then a detailed description of expenditure on medicinal products, followed by a description of health care personnel, and capacity and services in hospitals.

## Indledning

I dette kapitel gives der en samlet belysning af ressourcer og ressourceforbruget inden for sundhedsvæsenet. Først omtales de samlede sundhedsudgifter, med særlig omtale af udgifter til medicin, efterfulgt af sundhedspersonalet, kapacitet og ydelser i sygehusvæsenet.

## 5.1. Health care expenditure 5.1. Sundhedsudgifter

### Development of health care expenditure

Health plays a central role in peoples' everyday life and is an issue that people are concerned about. Thus health is often a topic for debate, and health issues receive much attention in the press. Attention is particularly focussed on production of health services. Questions are asked about whether health services are adequate and about what health care costs society and individuals. The increasing cost of health care is an issue of concern in many countries. According to OECD, the reason for this concern is that health services are mainly publicly financed. Thus increasing health care expenditure is an extra burden on public budgets and, if priorities are not changed, this will lead to higher taxes for both citizens and companies.

In the Nordic countries, between 75 and 85 per cent of health care expenditure is publicly financed. In 2004, the level of public financing was lowest in Finland with 75 per cent, while the proportion in the other Nordic countries was over 80 per cent.

### Udviklingen i sundhedsudgifterne

Sundhed angår folks hverdag og har en central placering i folks bevidsthed. Dermed bliver temaet til genstand for debat og sundhedsspørgsmål får en mere dominerende plads i pressen. Der sættes især fokus på det stigende pres på forbruget af sundhedsydelser. Der stilles spørgsmål om sundhedsvæsenet er tilstrækkelig og i forlængelse af dette stilles der spørgsmål om hvad sundhedsvæsenet koster det offentlige og den enkelte. Stigende sundhedsudgifter er årsag til bekymring i mange lande. Ifølge OECD er årsagen til dette at det offentlige finansierer største delen af udgifterne. Stigende sundhedsudgifter bliver derved en ekstra byrde på de offentlige budgetter og vil, hvis der ikke foretages en omprioritering i budgetterne, medføre at skattetrykket for både borgere og virksomheder stiger.

I de nordiske lande finansierer det offentlige mellem 75 og 85 procent af sundhedsudgifterne. I 2004 var det offentliges andel lavest i Finland med 75 procent mens andelen i de andre nordiske lande var godt og vel 80 procent.

## RESOURCES

Measured in relation to gross domestic product (GDP), health care expenditure has been relatively stable or has shown a slight increase during the second half of the 1990s and the beginning of this century. With the exception of Finland, health care expenditure represents between approx. 7 and 10 per cent of GDP.

Table 5.1.3 shows health care expenditure per inhabitant, which was highest in Norway and lowest in the Faroe Islands.

Målt i forhold til bruttonationalproduktet (BNP) har sundhedsudgifterne været relativt stabile eller svagt stigende i den sidste halvdel af 1990'erne og i begyndelsen af det nye årtusind. Med undtagelse af Finland er sundhedsudgifternes andel af BNP mellem ca. 7 og 10 procent.

Tabel 5.1.3. viser sundhedsudgifterne per indbygger, som var højest i Norge og lavest på Færøerne.

### Changes in the recording of health care expenditure

Health care expenditure includes all expenditure, both private and public, on consumption or investment in health services etc. Expenditure can be financed both privately and publicly, including by households. Examples of health care expenditure by households are the cost of spectacles, orthopaedic items, medicinal products, dental treatment, medical treatment, physiotherapy services and other health services. Other types of expenditure include national insurance or private insurance reimbursements for use of health services, and public expenditure (net) on hospitals and primary health services.

Public expenditure on preventive measures and administration of health services is included. Expenditure on running private hospitals that are not included in the public budget is also included.

Health care expenditure also includes part of the expenditure on nursing and care for elderly people and people with disabilities. According to international guidelines, this

### Ændring af opgørelsesmetoden for sundhedsudgifterne

Udgifterne til sundhedsformål omfatter alle udgifter, både private og offentlige, der går til forbrug eller investeringer i sundhedsvæsenet m.v. Udgifterne kan finansieres både af offentlige og private kilder, inklusiv husholdningerne. Som sundhedsudgifter regnes eksempelvis husholdningernes køb af briller og ortopædisk udstyr, lægemidler, tandbehandling, lægebehandling, forbrug af fysioterapi og andre sundhedsydelser, samt det offentliges, eller forsikringernes refusion for brugen af sundhedsydelserne samt det offentliges udgifter (netto) til drift af sygehuse og det primære sundhedsvæsen m.v.

Det offentliges udgifter til forbyggende foranstaltninger samt administration af sundhedsvæsenet er ligeledes inkluderet. Det samme gælder udgifter til drift af private sygehuse m.v. som ligger udenfor de offentlige budgetter.

Sundhedsudgifterne omfatter også dele af udgifterne til pleje og omsorg for ældre og funktionshæmmede. Ifølge internationale retningslinier gælder dette den del af pleje

applies to the part of expenditure on nursing and care that can be specified as expenditure related to health. Services for elderly people and people with disabilities are often integrated, and it can be difficult to draw a clear demarcation between what shall be defined as expenditure on health services and what shall be defined as expenditure on social services. What is included as expenditure on health services can vary for the different countries.

There will always be such problems when one compares statistics from several countries. This does not mean that comparisons are worthless, but one must be aware that some of the observed differences can be the result of different definitions and demarcations.

In order to ensure the best possible comparability of statistics, international organizations such as OECD, UN and EUROSTAT work on producing classifications, standards and definitions. For example, OECD have developed "A System of Health Accounts". This accounting system has been developed in order to meet the political needs for data, and also the needs of researchers in this area. The common framework that the system is built on will ensure that the comparability of data between countries and over time is as good as possible. The system is also developed to provide comparable statistics, independently of how health services are organized in the countries.

All the Nordic countries have implemented, or are in the process of implementing, OECD's system of health accounts, and the figures presented in this publication are based on this system. Not all the countries have come equally far in

og omsorgsudgifterne der kan specificeres som udgifter til sundhedsformål. Ydelserne til ældre og funktionshæmmede er ofte integrerede og det kan være vanskeligt at sætte klare grænser for hvad der skal defineres som sundhedsudgifter og hvad der er udgifter til social omsorg. Dette kan være en kilde til forskellig afgrænsning af hvad der medtages som sundhedsudgifter i de enkelte lande.

Der vil altid komme sådanne problemer når man sammenligner statistik for flere lande. Dette betyder dog ikke at sammenligningen er værdiløs, men man må tage hensyn til nogle af de forskelle der observeres der kan skyldes forskellige definitioner og afgrænsninger.

For at sikre den bedst mulige sammenlignelighed, arbejder internationale organisationer som OECD, FN og EUROSTAT med at etablere klassifikationer, standarder og definitioner. OECD har blandt andet udviklet et system for sundhedsregnskab ("A System of Health Accounts") Regnskabssystemet er udviklet for at møde politiske behov for data såvel behovet hos forskere på området. Den fælles ramme som systemet er bygget op på, vil sikre den bedst mulige sammenlignelighed af data mellem lande over tid. Systemet er også udviklet således at det giver sammenlignelige tal uafhængig af hvorledes sundhedsvæsenet er organiseret i landene.

Alle de nordiske lande har eller er i færd med at indføre OECD's system for sundhedsregnskab, og tallene i denne publikation baserer sig på dette system. Alle landene er ikke kommet lige langt i implementeringen af systemet, men på det ag-

implementing the system, but at the aggregated level on which the data are presented here, the data are assessed as being comparable. However, the unsolved problems faced by the countries and the different solutions they have found must be taken into account when interpreting the data. For example, the reason that per capita health care expenditure in Finland is 30 per cent lower than in the other countries, may be because the demarcation of what is included as health care expenditure on care of the elderly may be different from in the other countries. At the same time, Table 5.1.3 shows that health care expenditure per capita in Norway is substantially higher than in the other countries. It is important to be aware of the fact that OECD's system of health accounts and EUROSTAT's ESSPROS system are very different. Thus data on health care expenditure from these two sources are very different. EUROSTAT data are published by NOSOSCO in the publication *Social Protection in the Nordic Countries*.

ESSPROS includes all social arrangements, both public and private. The statistics include pension schemes, insurance schemes, humanitarian organizations and other charitable organizations. Insurance schemes are included if they are collective. This means that expenditure on health also includes sickness benefits (or salary paid during sickness) including sickness benefits paid by employers. These cash payments are not included in OECD's system, in which only expenditure on actual health services is included.

gregerede niveau som data præsenteres her, vurderes de at være sammenlignelige. Man må alligevel tage forbehold over for de vanskeligheder der står tilbage, og som landene måske har løst forskelligt. Der er blandt grund til at stille spørgsmålstejn ved om der er forskellige afgrænsninger af ældreområdet der gør at Finland har sundhedsudgifter per indbygger der rundt regnet er 30 pct. lavere end gennemsnittet i de andre nordiske lande. Samtidig ser man i tabel 5.1.3 at Norge har udgifter per indbygger som ligger væsentlig højere end i de andre lande. Det er vigtigt at være klar over at OECD's sundhedsregnskabssystem og dermed data om sundhedsudgifter adskiller sig væsentlig fra sundhedsudgifter der publiceres af EUROSTAT efter ESSPROS - systemet og som også publiceres af NOSOSCO i publikationen *Social tryghed i de nordiske lande*.

ESSPROS omfatter alle sociale ordninger, enten de drives af offentlige eller private. Statistikken omfatter også pensionskasser og fonde, forsikringer, humanitære organisationer og andre velgørende organisationer. Forsikringsordningerne er medtaget hvis de er kollektive. Det betyder at udgifter til sygdom også vil omfatte sygedagpenge (sygedagpenge eller løn under sygdom) herunder sygedagpenge betalt af arbejdsgiveren. Dette er kontantydelse som ikke medregnes som sundhedsudgifter i OECD's system, hvor det kun er udgifterne til den sundhedsmæssige service der er medtaget.

## Developments in expenditure on medicinal products

As mentioned previously, in 2004, NOMESCO published Medicines Consumption in the Nordic Countries 1999–2003, which presents detailed information about expenditure on medicinal products in the Nordic countries. Table 5.1.4 shows the total sales of medicinal products according to ATC group for each of the Nordic countries. In order to have a better basis for comparison, expenditure in 5.1.5 is presented in EUR per capita.

The medicinal products for which expenditure is high are largely the same in all the Nordic countries.

It is difficult to compare expenditure on medicinal products in the hospital sector between countries, since hospitals pay very different prices for the same medicines, and prices are very different from prices in pharmacies in the primary health sector.

Measured in EUR per capita, expenditure on medicinal products is considerably higher in Iceland than in the other countries. The greatest difference in expenditure on medicinal products is for ATC group N. User charges are highest in Iceland followed by Finland and Åland.

## Udvikling i lægemiddeludgifter

I 2004 udgav NOMESKO, som tidligere nævnt publikationen *Lægemiddelforbruget i de nordiske lande 1999 – 2003* hvori der findes en meget omfattende belysning af medicinudgifterne i de nordiske lande. I tabel 5.1.4 ses de samlede udgifter til lægemidler i de enkelte nordiske lande fordelt på ATC-hovedgrupper 2003. For at få et bedre sammenligningsgrundlag er udgifterne i tabel 5.1.5 omregnet til EUR per capita.

I alle landene er det i stor udstrækning de samme lægemidler, som vejer tungt i udgifterne.

Det er dog generelt set svært at sammenligne udgifterne i denne sektor mellem landene, da sygehusene erhverver sig lægemidler til vidt forskellige priser og til helt andre priser end apotekerne i den primære sektor.

Målt i EUR per capita har Island betydeligt større udgifter til lægemidler og Grønland det mindste i forhold til de øvrige lande hvor den mest markante forskel for Islands vedkommende findes i udgifterne til gruppe N. Egenbetalingen er højest i Island efterfulgt af Finland og Åland.

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**Table 5.1.1 Health care expenditure (million KR/EUR) 2004**  
Udgifter til sundheds- og sygepleje (mio. KR/EUR) 2004

|                                             | Denmark <sup>1)2)</sup> | Faroe Islands <sup>2)</sup> | Greenland | Finland <sup>3)</sup> | Iceland <sup>1)</sup> | Norway <sup>4)</sup> | Sweden <sup>1)</sup> |
|---------------------------------------------|-------------------------|-----------------------------|-----------|-----------------------|-----------------------|----------------------|----------------------|
|                                             | DKK                     | DKK                         | DKK       | EUR                   | ISK                   | NOK                  | SEK                  |
| <i>Public financing</i>                     |                         |                             |           |                       |                       |                      |                      |
| Offentlig finansiering                      | 104 678                 | 734                         | 897       | 8 609                 | 75 551                | 139 635              | 198 274              |
| <i>Private financing</i>                    |                         |                             |           |                       |                       |                      |                      |
| Privat finansiering                         | 20 302                  | 90                          | 2         | 2 631                 | 15 079                | 27 624               | 35 176               |
| <i>Total health care expenditure</i>        |                         |                             |           |                       |                       |                      |                      |
| Samlede udgifter til sundheds- og sygepleje | 124 980                 | 824                         | 899       | 11 240                | 90 630                | 167 259              | 233 450              |

1 Preliminary estimates.  
2 2003.  
3 Finnish figures include Åland.  
4 Changes in method of calculation for 2003 and 2004 for Denmark and from 2000 for Norway.

1 Foreløbige tal for 2004  
2 2003  
3 Finske tal inkluderer Åland  
4 Ændringer i opgørelsesmetode for 2003 og 2004 for Danmark og for Norge fra 2000.

Source: OECD HEALTH DATA 2006

Kilde: FI: Statistics Faroe Islands; G: Directorate of Health

**Table 5.1.2 Health care expenditure (EUR/capita) 2004**  
Udgifter til sundheds- og sygepleje (EUR/capita) 2004

|                                             | Denmark <sup>1)4)</sup> | Faroe Islands <sup>2)</sup> | Greenland | Finland <sup>3)</sup> | Iceland <sup>1)</sup> | Norway <sup>4)</sup> | Sweden <sup>1)</sup> |
|---------------------------------------------|-------------------------|-----------------------------|-----------|-----------------------|-----------------------|----------------------|----------------------|
| <i>Public financing</i>                     |                         |                             |           |                       |                       |                      |                      |
| Offentlig finansiering                      | 2 605                   | 2 057                       | 2 118     | 1 647                 | 2 963                 | 3 633                | 2 416                |
| <i>Private financing</i>                    |                         |                             |           |                       |                       |                      |                      |
| Privat finansiering                         | 505                     | 252                         | 5         | 503                   | 591                   | 719                  | 429                  |
| <i>Total health care expenditure</i>        |                         |                             |           |                       |                       |                      |                      |
| Samlede udgifter til sundheds- og sygepleje | 3 110                   | 2 309                       | 2 123     | 2 150                 | 3 554                 | 4 352                | 2 845                |

1 Preliminary estimates.  
2 2003.  
3 Finnish figures include Åland.  
4 Changes in method of calculation for 2003 and 2004 for Denmark and from 2000 for Norway.

1 Foreløbige tal for 2004  
2 2003  
3 Finske tal inkluderer Åland  
4 Ændringer i opgørelsesmetode for 2003 og 2004 for Danmark og for Norge fra 2000.

Source: OECD HEALTH DATA 2006

Kilde: FI: Statistics Faroe Islands; G: Directorate of Health

**Table 5.1.3 GDP and health care expenditure in total and per capita 1995-2004**

BNP og udgifter til sundheds- og sygepleje i alt og pr. indbygger 1995-2004

|                                             | Denmark <sup>1)4)</sup> | Faroe Islands <sup>2)</sup> | Greenland | Finland <sup>3)</sup> | Iceland <sup>1)</sup> | Norway <sup>4)</sup> | Sweden <sup>1)</sup> |
|---------------------------------------------|-------------------------|-----------------------------|-----------|-----------------------|-----------------------|----------------------|----------------------|
|                                             | DKK                     | DKK                         | DKK       | EUR                   | ISK                   | NOK                  | SEK                  |
| <i>Total expenditure per capita 2004</i>    |                         |                             |           |                       |                       |                      |                      |
| Samlede udgifter pr. indbygger 2004         | 24 232                  | 17 818                      | 15 812    | 2 150                 | 309 740               | 36 425               | 25 956               |
| <i>GDP (million) 2004</i>                   |                         |                             |           |                       |                       |                      |                      |
| BNP (mio.) 2004                             | 1 467 311               | 9 764                       | 9 827     | 151 935               | 916 765               | 1 906 062            | 2 573 176            |
| <i>Expenditure in 2004-prices (million)</i> |                         |                             |           |                       |                       |                      |                      |
| <i>Udgifter i 2004-priser (mio.)</i>        |                         |                             |           |                       |                       |                      |                      |
| 1995                                        | 99 829                  | 683                         | 818       | 8 095                 | 52 085                | 105 337              | 162 732              |
| 2000                                        | 116 880                 | 635                         | 876       | 9 086                 | 72 480                | 134 719              | 197 720              |
| 2003                                        | 128 092                 | 830                         | 861       | 10 728                | 86 990                | 168 630              | 230 612              |
| 2004                                        | 130 877                 | ..                          | 899       | 11 240                | 90 630                | 167 259              | 233 450              |
| <i>Expenditures as a percentage of GDP</i>  |                         |                             |           |                       |                       |                      |                      |
| <i>Udgifter i pct. af BNP</i>               |                         |                             |           |                       |                       |                      |                      |
| 1995                                        | 8.2                     | 7,0                         | 8,3       | 7.5                   | 8.4                   | 7.9                  | 8.1                  |
| 2000                                        | 8.4                     | 6,5                         | 8,9       | 6.7                   | 9.3                   | 7.7                  | 8.4                  |
| 2003                                        | 9.0                     | 8,5                         | 8,8       | 7.4                   | 10.5                  | 10.3                 | ..                   |
| 2004                                        | 8.9                     | ..                          | 9,1       | 7.5                   | 9.9                   | 9.7                  | 9.1                  |

1 Preliminary estimates.

2 Expenditures 2003 in 2004 prices.

3 Finnish figures include Åland.

4 Changes in method of calculation for 2003 and 2004 for Denmark and from 2000 for Norway.

1 Foreløbige tal for 2004.

2 Udgifter 2003 i 2004 priser.

3 Finske tal inkluderer Åland.

4 Ændringer i opgørelsesmetode for 2003 og 2004 for Danmark og for Norge fra 2000.

Source: OECD HEALTH DATA 2006

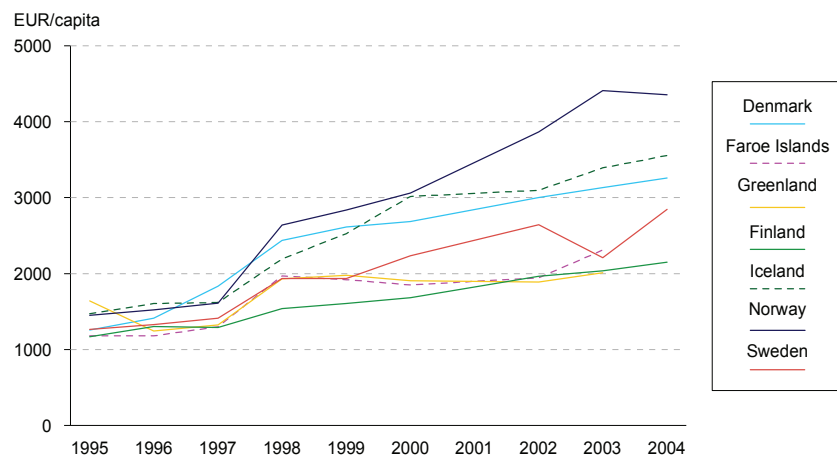
Kilde: FI: Statistics Faroe Islands; G: Directorate of Health

Source: OECD HEALTH DATA 2006

Kilde: FI: Statistics Faroe Islands; G: Directorate of Health

**Figure 5.1.1 Total health care expenditure (EUR/capita) 2003**

Samlede udgifter til sundheds- og sygepleje (EUR/capita) 2003

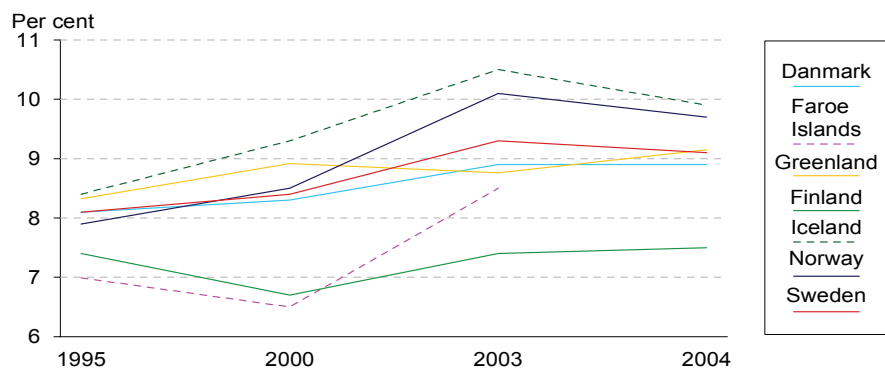


Sources: Table 5.1.3

Kilder: Tabel 5.1.3

**Figure 5.1.2 Health care expenditure as a percentage of GDP 1995-2004**

Udgifter til sundheds- og sygepleje i pct. af BNP 1995-2004



Source: OECD HEALTH DATA 2006

Kilde: FI: Statistics Faroe Islands; G: Directorate of Health

**Table 5.1.4 Sales of medicinal products by ATC-group, calculated in pharmacy retail prices (million EUR), 2004**

Salg af lægemidler fordelt på ATC-grupper, apotekernes salgspris (mio. EUR) 2004

|                                                                          | Denmark | Faroe Islands | Greenland | Finland <sup>1)</sup> | of which Åland <sup>1)</sup> | Iceland | Norway | Sweden |
|--------------------------------------------------------------------------|---------|---------------|-----------|-----------------------|------------------------------|---------|--------|--------|
| <i>A Alimentary tract and metabolism</i>                                 |         |               |           |                       |                              |         |        |        |
| Fordøjelse og stofskifte                                                 | 199     | 1.8           | 0.3       | 262                   | 1.1                          | 18.3    | 210    | 395    |
| <i>B Blood and blood-forming organs</i>                                  |         |               |           |                       |                              |         |        |        |
| Blod og bloddannende organer                                             | 143     | 1.4           | 0.2       | 110                   | 0.6                          | 8.9     | 97     | 280    |
| <i>C Cardiovascular system</i>                                           |         |               |           |                       |                              |         |        |        |
| Hjerte og kredsløb                                                       | 250     | 3.2           | 0.3       | 407                   | 1.7                          | 21.9    | 317    | 383    |
| <i>D Dermatologicals</i>                                                 |         |               |           |                       |                              |         |        |        |
| Hudmidler                                                                | 46      | 0.3           | 0.3       | 61                    | 0.2                          | 4.6     | 47     | 102    |
| <i>G Genito-urinary system and sex hormones</i>                          |         |               |           |                       |                              |         |        |        |
| Kønshormoner m.m.                                                        | 114     | 0.7           | 0.3       | 163                   | 0.6                          | 10.2    | 92     | 169    |
| <i>H Systemic hormonal preparations, excl. sex hormones and insulins</i> |         |               |           |                       |                              |         |        |        |
| Hormoner til systemisk brug                                              | 38      | 0.3           | 0.1       | 44                    | 0.2                          | 2.9     | 42     | 87     |
| <i>J Anti-infectives for systemic use</i>                                |         |               |           |                       |                              |         |        |        |
| Infektionssygdomme                                                       | 204     | 1.2           | 0.8       | 142                   | 0.9                          | 13.1    | 118    | 191    |
| <i>L Antineoplastic and immunomodulating agents</i>                      |         |               |           |                       |                              |         |        |        |
| Cancermidler m.m.                                                        | 169     | 1.1           | 0.3       | 201                   | 1.5                          | 14.3    | 191    | 342    |
| <i>M Musculo-skeletal system</i>                                         |         |               |           |                       |                              |         |        |        |
| Muskler, led og knogler                                                  | 96      | 0.5           | 0.1       | 166                   | 0.7                          | 11.0    | 115    | 158    |
| <i>N Nervous system</i>                                                  |         |               |           |                       |                              |         |        |        |
| Nervesystemet                                                            | 507     | 3.2           | 1.4       | 446                   | 1.7                          | 48.3    | 384    | 645    |
| <i>P Antiparasitic products, insecticides and repellents</i>             |         |               |           |                       |                              |         |        |        |
| Parasitmidler                                                            | 10      | 0.1           | 0.0       | 6                     | 0.0                          | 0.4     | 5      | 9      |
| <i>R Respiratory system</i>                                              |         |               |           |                       |                              |         |        |        |
| Åndedrætsorganer                                                         | 201     | 1.3           | 0.4       | 193                   | 1.0                          | 13.8    | 205    | 259    |
| <i>S Sensory organs</i>                                                  |         |               |           |                       |                              |         |        |        |
| Sanseorganer                                                             | 34      | 0.2           | 0.1       | 44                    | 0.2                          | 3.2     | 41     | 65     |
| <i>V Various</i>                                                         |         |               |           |                       |                              |         |        |        |
| Diverse                                                                  | 22      | 0.2           | 0.5       | 17                    | 0.1                          | 1.4     | 19     | 48     |
| <i>Total I alt</i>                                                       | 2 033   | 15.4          | 5.4       | 2 261                 | 10.6                         | 172.4   | 1 883  | 3 132  |
| <i>Of which user charges</i>                                             | 604     | -             | -         | 922                   | 4.1                          | 98.7    | 556    | 603    |

Sources: D: Danish Medicines Agency; FI: Chief Pharmaceutical Officer; G: The Central Pharmacy in Copenhagen County; F & Å: National Agency for Medicines; I: Ministry of Health and Social Security; N: Norwegian Institute of Public Health; S: National Corporation of Swedish Pharmacies

1 For Finland and Åland, sales in the primary health sector are calculated in PRP (pharmacy retail prices) and in the hospital sector in PPP (pharmacy purchase prices).

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**Table 5.1.5 Sales of medical products by ATC-group, EUR/capita 2004 – based on pharmacy retail prices**  
 Salg af lægemidler fordelt på ATC-grupper, EUR/capita 2004 – baseret på apotekernes salgspris

|                                                                                                         | Denmark    | Faroe Islands | Greenland | Finland    | Åland      | Iceland    | Norway     | Sweden     |
|---------------------------------------------------------------------------------------------------------|------------|---------------|-----------|------------|------------|------------|------------|------------|
| A <i>Alimentary tract and metabolism</i><br>Fordøjelse og stofskifte                                    | 37         | 38            | 6         | 50         | 41         | 63         | 46         | 44         |
| B <i>Blood and blood-forming organs</i><br>Blod og bloddannende organer                                 | 26         | 28            | 4         | 21         | 22         | 30         | 21         | 31         |
| C <i>Cardiovascular system</i><br>Hjerte og kredsløb                                                    | 46         | 65            | 6         | 78         | 63         | 75         | 69         | 43         |
| D <i>Dermatologicals</i><br>Hudmidler                                                                   | 9          | 7             | 6         | 12         | 8          | 16         | 10         | 11         |
| G <i>Genito-urinary system and sex hormones</i><br>Kønshormoner m.m.                                    | 21         | 14            | 5         | 31         | 24         | 35         | 20         | 19         |
| H <i>Systemic hormonal preparations, excl. sex hormones and insulins</i><br>Hormoner til systemisk brug | 7          | 6             | 2         | 8          | 8          | 10         | 9          | 10         |
| J <i>Anti-infectives for systemic use</i><br>Infektionssygdomme                                         | 38         | 24            | 15        | 27         | 35         | 45         | 26         | 21         |
| L <i>Antineoplastic and immunomodulating agents</i><br>Cancermidler m.m.                                | 31         | 23            | 6         | 38         | 58         | 49         | 42         | 38         |
| M <i>Musculo-skeletal system</i><br>Muskler, led og knogler                                             | 18         | 10            | 2         | 32         | 26         | 38         | 25         | 18         |
| N <i>Nervous system</i><br>Nervesystemet                                                                | 94         | 65            | 25        | 85         | 63         | 165        | 84         | 72         |
| P <i>Antiparasitic products, insecticides and repellents</i><br>Parasitmidler                           | 2          | 1             | 1         | 1          | 2          | 1          | 1          | 1          |
| R <i>Respiratory system</i><br>Åndedrætsorganer                                                         | 37         | 26            | 6         | 37         | 36         | 47         | 45         | 29         |
| S <i>Sensory organs</i><br>Sanseorganer                                                                 | 6          | 5             | 2         | 8          | 7          | 11         | 9          | 7          |
| V <i>Various</i><br>Diverse                                                                             | 4          | 3             | 8         | 3          | 3          | 5          | 4          | 5          |
| <b>Total I alt</b>                                                                                      | <b>377</b> | <b>318</b>    | <b>95</b> | <b>432</b> | <b>398</b> | <b>589</b> | <b>411</b> | <b>349</b> |
| <b>Of which user charges</b>                                                                            | <b>112</b> | <b>-</b>      | <b>-</b>  | <b>176</b> | <b>155</b> | <b>337</b> | <b>121</b> | <b>67</b>  |

Sources: See Table 5.1..5

Kilder: Se tabel 5.1.5

## 5.2 Health care personnel

For many years it has been difficult to obtain comparable data about health care personnel in the Nordic countries, because the sources for the data have been very different.

Therefore, in 2003, NOMESCO appointed a working group to obtain more comparable data, and to define health care personnel in the way that is done for health economy in OECD's A System for Health Accounts.

For this purpose, it has been found to be most appropriate to use NACE's classification of occupations, linked to the registers of authorization for health care personnel. These registers are more comparable, though the data are still incomplete and there are some inaccuracies.

With the new definitions and groups, data on health care personnel for previous years (before 2004) are not comparable with more recent data, since data for new groups of health care personnel are included.

It should be noted that the group 'qualified auxiliary nurses' is now subdivided. Those with an education of at least 18 months remain in this group, while those with an education of less than 18 months are included in the group 'other care personnel'. Since Sweden only has data for employees in the public service, data for these categories are not included. 'Other health personnel with a higher education' is defined as personnel with a university degree such as dieticians and pharmacists. Furthermore for physicians a group is included with physicians who do not work

## 5.2 Sundhedspersonale

Det har i mange år været vanskeligt at fremskaffe sammenlignelige data om sundhedspersonale for de nordiske lande, især fordi kildegrundlaget har været meget forskelligt.

Derfor nedsatte NOMESKO i 2003 en arbejdsgruppe, med henblik på at skaffe data med mere ensartet kildegrundlag, samt definere sundhedspersonalet med samme afgrænsning som findes for sundhedsøkonomien i OECD's A System for Health Accounts.

Til det brug har man fundet det mest hensigtsmæssigt at anvende erhvervsklassifikationen (NACE's) definitioner og afgrænsninger, sammenkoblet med de personer der findes i autorisationsregistre, hvorved man har fundet mere sammenlignelige data, selv om der stadigvæk findes fejl og mangler.

Med de nye definitioner og afgrænsninger er oplysningerne om sundhedspersonale fra tidligere år (før 2004) ikke sammenlignelige med de nuværende oplysninger, ligesom der er medtaget data for nye personalegrupper.

Her skal det bemærkes at gruppen *qualified auxiliary nurses*, tidligere benævnt sygehjælpere på dansk, nu er opdelt i gruppen sygeplejerskeassistenter for de der har en uddannelse på mindst 18 måneder og de der har en uddannelse på under 18 måneder er medtaget i gruppen andet plejepersonale. Da Sverige kun har data for ansat i det offentlige er der ikke medtaget data for disse personalekategorier. Andet sundhedspersonale med en højere uddannelse er defineret som personale med en universitetsuddannelse så som ernæringsfysiologer og farmaceuter. Endvidere er

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in the social and health care sectors, and not with medicine.

der for læger, medtaget en gruppe som ikke arbejder indenfor social og sundhedssektoren, herunder ikke med deres fag.

Furthermore, the included data are registered at a given time of the year.

De medtagne data er desuden en opgørelse på et givet tidspunkt i året.

Additionally it should be noted that Finnish figures only cover the public sector.

Desuden skal det bemærkes at de finske data kun gælder den offentlige sektor.

**Table 5.2.1 Employed health personnel in health and social services 2004 (NACE 85.1 and 85.3)**  
Erhvervsaktivt sundhedspersonale indenfor sundheds- og socialområdet 2004 (NACE 85.1 og 85.3)

|                                                       | Denmark | Faroe Islands | Greenland | Finland | Åland | Iceland             | Norway | Sweden <sup>3)</sup> |
|-------------------------------------------------------|---------|---------------|-----------|---------|-------|---------------------|--------|----------------------|
| <i>Physicians</i>                                     |         |               |           |         |       |                     |        |                      |
| Læger                                                 | 16 439  | 90            | 87        | 11 492  | 69    | 1 056               | 15 960 | 29 190               |
| <i>Dentists</i>                                       |         |               |           |         |       |                     |        |                      |
| Tandlæger                                             | 4 616   | 40            | 29        | 2 395   | 21    | 287                 | 3 675  | 7 281                |
| <i>Dental hygienists</i>                              |         |               |           |         |       |                     |        |                      |
| Tandplejere                                           | 1 114   | ..            | 75        | 3 641   | 27    | 25                  | 747    | 2 952                |
| <i>Dental surgery assistants</i>                      |         |               |           |         |       |                     |        |                      |
| Tandlægeassistenter                                   | 3 787   | 44            | ..        | -       | -     | 303                 | 2 854  | ..                   |
| <i>Psychologists</i>                                  |         |               |           |         |       |                     |        |                      |
| Psykologer                                            | 2 439   | 5             | 5         | 1 855   | 6     | 39 <sup>1)</sup>    | 3 115  | 4 318                |
| <i>Qualified nurses</i>                               |         |               |           |         |       |                     |        |                      |
| Sygeplejersker                                        | 51 557  | 354           | 243       | 46 838  | 315   | 2 525               | 68 304 | 87 012               |
| <i>Radiographers</i>                                  |         |               |           |         |       |                     |        |                      |
| Radiografer                                           | 1 118   | 5             | ..        | 1 873   | 9     | 88                  | 1 943  | 205                  |
| <i>Qualified auxiliary nurses</i>                     |         |               |           |         |       |                     |        |                      |
| Sygeplejerskeassistenter                              | 25 513  | 118           | 197       | 34 435  | 438   | 1 474 <sup>2)</sup> | 70 785 | ..                   |
| <i>Other care personnel</i>                           |         |               |           |         |       |                     |        |                      |
| Andet plejepersonale                                  | 56 074  | ..            | ..        | 21 710  | 111   | ..                  | ..     | ..                   |
| <i>Midwives</i>                                       |         |               |           |         |       |                     |        |                      |
| Jordemødre                                            | 1 279   | 19            | 16        | 1 682   | 11    | 200 <sup>2)</sup>   | 2 309  | 6 123                |
| <i>Physiotherapists</i>                               |         |               |           |         |       |                     |        |                      |
| Fysioterapeuter                                       | 5 328   | 17            | 13        | 2 531   | 19    | 431                 | 7 125  | 10 046               |
| <i>Occupational therapists</i>                        |         |               |           |         |       |                     |        |                      |
| Ergoterapeuter                                        | 4 509   | 10            | 4         | 671     | 7     | 147                 | 2 194  | 6 973                |
| <i>Hospital laboratory technicians</i>                |         |               |           |         |       |                     |        |                      |
| Hospitalslaboranter                                   | 5 363   | 35            | 24        | 3 879   | 21    | 299                 | 4 040  | ..                   |
| <i>Other health personnel with a higher education</i> |         |               |           |         |       |                     |        |                      |
| Andet sundheds-personale med en højere uddannelse     | 494     | ..            | ..        | -       | 6     | ..                  | 2 954  | ..                   |

1 Refers to 2003.

2 2002.

3 November 2003.

1 Refererer til 2003.

2 2002

3 Nov 2003.

Source: D: National Board of Health; FI: Hospital Board; G: Directorate for Health; F: STAKES; Å: Government of Åland; I: Directorate of Health; N: Statistics Norway; S: National Board of Health and Welfare

## RESOURCES

**Table 5.2.2 Employed health personnel in health and social services 2004  
per 100 000 inhabitants (NACE 85.1 and 85.3)**  
Erhvervsaktivt sundhedspersonale indenfor sundheds- og socialområdet per  
100 000 indbyggere 2004 (NACE 85.1 og 85.3)

|                                                          | Denmark | Faroe<br>Islands | Greenland | Finland | Åland | Iceland           | Norway | Sweden <sup>3)</sup> |
|----------------------------------------------------------|---------|------------------|-----------|---------|-------|-------------------|--------|----------------------|
| <i>Physicians</i>                                        |         |                  |           |         |       |                   |        |                      |
| Læger                                                    | 304     | 188              | 153       | 220     | 261   | 361               | 348    | 325                  |
| <i>Dentists</i>                                          |         |                  |           |         |       |                   |        |                      |
| Tandlæger                                                | 85      | 83               | 51        | 46      | 79    | 98                | 80     | 81                   |
| <i>Dental hygienists</i>                                 |         |                  |           |         |       |                   |        |                      |
| Tandplejere                                              | 21      | ..               | 132       | 70      | 102   | 9                 | 16     | 33                   |
| <i>Dental surgery assistants</i>                         |         |                  |           |         |       |                   |        |                      |
| Tandlægeassistenter                                      | 70      | 92               | ..        | -       | -     | 104               | 62     | ..                   |
| <i>Psychologists</i>                                     |         |                  |           |         |       |                   |        |                      |
| Psykologer                                               | 45      | 10               | 9         | 35      | 23    | 13 <sup>1)</sup>  | 68     | 48                   |
| <i>Qualified nurses</i>                                  |         |                  |           |         |       |                   |        |                      |
| Sygeplejersker                                           | 955     | 738              | 427       | 896     | 1 191 | 863               | 1 487  | 967                  |
| <i>Radiographers</i>                                     |         |                  |           |         |       |                   |        |                      |
| Radiografer                                              | 21      | 10               | ..        | 36      | 34    | 30                | 42     | 2                    |
| <i>Qualified auxiliary nurses</i>                        |         |                  |           |         |       |                   |        |                      |
| Sygeplejerskeassistenter                                 | 472     | 246              | 346       | 659     | 1 657 | 504 <sup>2)</sup> | 1 542  | ..                   |
| <i>Other care personnel</i>                              |         |                  |           |         |       |                   |        |                      |
| Andet plejepersonale                                     | 1 038   | ..               | ..        | 415     | 420   | ..                | ..     | ..                   |
| <i>Midwives</i>                                          |         |                  |           |         |       |                   |        |                      |
| Jordemødre                                               | 24      | 40               | 28        | 32      | 42    | 68 <sup>2)</sup>  | 50     | 68                   |
| <i>Physiotherapists</i>                                  |         |                  |           |         |       |                   |        |                      |
| Fysioterapeuter                                          | 99      | 35               | 23        | 48      | 72    | 147               | 155    | 112                  |
| <i>Occupational therapists</i>                           |         |                  |           |         |       |                   |        |                      |
| Ergoterapeuter                                           | 83      | 21               | 7         | 13      | 26    | 50                | 48     | 78                   |
| <i>Hospital laboratory technicians</i>                   |         |                  |           |         |       |                   |        |                      |
| Hospitalslaboranter                                      | 99      | 73               | 42        | 74      | 79    | 102               | 88     | ..                   |
| <i>Other health personnel with a higher education</i>    |         |                  |           |         |       |                   |        |                      |
| Andet sundheds-<br>personale med en<br>højere uddannelse | 9       | ..               | ..        | -       | 23    | ..                | 64     | ..                   |

1 Refers to 2003.

2 2002.

3 November 2003.

1 Refererer til 2003.

2 2002

3 November 2003.

Source: D: National Board of Health; FI: Hospital Board; G: Directorate for Health; F: STAKES; Å: Government of  
Kilde: the Åland Islands; I: Directorate of Health; N: Statistics Norway; S: National Board of Health and Welfare

**Table 5.2.3 Employed physicians by specialties in health and social services 2004  
(NACE 85.1 and 85.3)**

Erhvervsaktive læger fordelt på specialer indenfor social - og sundhedsområdet  
2004 (NACE 85.1 og 85.3)

|                                                        | Denmark | Faroe Islands <sup>1)</sup> | Greenland | Finland | Åland | Iceland <sup>2)</sup> | Norway | Sweden |
|--------------------------------------------------------|---------|-----------------------------|-----------|---------|-------|-----------------------|--------|--------|
| <i>General practice</i>                                |         |                             |           |         |       |                       |        |        |
| Almen medicin<br>(alment praktiserende læger)          | 3 949   | 27                          | 51        | 1 230   | 9     | 169                   | 1 944  | 4 917  |
| <i>Internal medicine</i>                               |         |                             |           |         |       |                       |        |        |
| Intern medicin                                         | 1 217   | ..                          | ..        | 1 250   | 8     | 143                   | 1 226  | 3 376  |
| <i>Paediatrics</i>                                     |         |                             |           |         |       |                       |        |        |
| Pædiatri                                               | 306     | ..                          | ..        | 155     | 5     | 50                    | 388    | 1 082  |
| <i>Surgery</i>                                         |         |                             |           |         |       |                       |        |        |
| Kirurgi                                                | 730     | ..                          | ..        | 845     | 3     | 59                    | 689    | 1 681  |
| <i>Plastic surgery</i>                                 |         |                             |           |         |       |                       |        |        |
| Plastik kirurgi                                        | 68      | ..                          | ..        | 5       | ..    | 8                     | 63     | 111    |
| <i>Gynaecology and obstetrics</i>                      |         |                             |           |         |       |                       |        |        |
| Gynækologi og obstetric                                | 469     | ..                          | ..        | 350     | 3     | 40                    | 461    | 1 128  |
| <i>Orthopaedic surgery, incl. hand surgery</i>         |         |                             |           |         |       |                       |        |        |
| Ortopædisk kirurgi, inkl. håndkirurgi                  | 519     | ..                          | ..        | 30      | 2     | 33                    | 318    | 993    |
| <i>Ophthalmology</i>                                   |         |                             |           |         |       |                       |        |        |
| Øjensygdomme                                           | 258     | ..                          | ..        | 175     | 1     | 27                    | 297    | 623    |
| <i>Ear, nose and throat</i>                            |         |                             |           |         |       |                       |        |        |
| Øre næse hals                                          | 312     | ..                          | ..        | 205     | ..    | 16                    | 246    | 574    |
| <i>Psychiatry</i>                                      |         |                             |           |         |       |                       |        |        |
| Psykiatri                                              | 85      | 3                           | 2         | 730     | 6     | 75                    | 1 022  | 1 761  |
| <i>Skin and sexually transmitted diseases</i>          |         |                             |           |         |       |                       |        |        |
| Hud og kønssygdomme                                    | 140     | ..                          | ..        | 85      | ..    | 15                    | 121    | 318    |
| <i>Neurology</i>                                       |         |                             |           |         |       |                       |        |        |
| Neurologi                                              | 186     | ..                          | ..        | 180     | ..    | 15                    | 203    | 247    |
| <i>Oncology</i>                                        |         |                             |           |         |       |                       |        |        |
| Onkologi                                               | 93      | ..                          | ..        | 90      | 1     | 15                    | 103    | 322    |
| <i>Anaesthetics</i>                                    |         |                             |           |         |       |                       |        |        |
| Anæstesiologi                                          | 774     | ..                          | ..        | 505     | 3     | 54                    | 573    | 1 172  |
| <i>Radiology</i>                                       |         |                             |           |         |       |                       |        |        |
| Radiologi                                              | 435     | ..                          | ..        | 395     | 1     | 36                    | 440    | 1 006  |
| <i>Clinical laboratory specialties incl. pathology</i> |         |                             |           |         |       |                       |        |        |
| Kliniske/laboratoriespecialer, inkl. patologi          | 463     | ..                          | ..        | 350     | ..    | 50                    | 364    | 823    |
| <i>Other specialties</i>                               |         |                             |           |         |       |                       |        |        |
| Andre specialer                                        | 103     | 35                          | 16        | 170     | 4     | 22                    | 543    | 774    |
| <i>Specialists in total</i>                            |         |                             |           |         |       |                       |        |        |
| Specialister i alt                                     | 10 107  | 65                          | 69        | 6 800   | 46    | 827                   | 9 001  | 20 908 |
| <i>Physicians without specialist authorization</i>     |         |                             |           |         |       |                       |        |        |
| Læger uden specialistgodkendelse                       | 6 332   | 25                          | 14        | 4 370   | 23    | 229                   | 6 959  | 8 282  |
| <i>Physicians in total within NACE 85.1 and 85.3</i>   |         |                             |           |         |       |                       |        |        |
| Læger i alt indenfor NACE 85.1 og 85.3                 | 16 439  | 90                          | 83        | 11 170  | 69    | 1 056                 | 15 960 | 29 190 |

1 2003

1 2003

2 Data based on the register of physicians at the Directorate of Health. The newest specialty chosen for those with more than one specialty.

2 Data er baseret på Helse Direktoratets register. Den nyeste specialisering er valgt, hvor der er flere end en specialisering.

Source: D: National Board of Health; FI: Hospital Board; G: Directorate for Health; F: STAKES; Å: Government of the Åland Islands; I: Directorate of Health; N: Statistics Norway; S: National Board of Health and Welfare

## RESOURCES

**Table 5.2.4 Employed physicians by specialties in health and social services per 100.000 inhabitants 2004 (NACE 85.1 and 85.3)**

Erhvervsaktive læger fordelt på specialer indenfor social - og sundhedsområdet per 100.000 indbyggere 2004 (NACE 85.1 og 85.3)

|                                                      | Denmark | Faroe Islands <sup>1)</sup> | Greenland | Finland | Åland | Iceland <sup>2)</sup> | Norway | Sweden |
|------------------------------------------------------|---------|-----------------------------|-----------|---------|-------|-----------------------|--------|--------|
| <i>General practice</i>                              |         |                             |           |         |       |                       |        |        |
| Almen medicin<br>(alment praktiserende læger)        | 73      | 56                          | 90        | 24      | 34    | 58                    | 42     | 55     |
| <i>Internal medicine</i>                             |         |                             |           |         |       |                       |        |        |
| Intern medicin                                       | 23      | ..                          | ..        | 24      | 30    | 49                    | 27     | 38     |
| <i>Paediatrics</i>                                   |         |                             |           |         |       |                       |        |        |
| Pædiatri                                             | 6       | ..                          | ..        | 3       | 19    | 17                    | 8      | 12     |
| <i>Surgery</i>                                       |         |                             |           |         |       |                       |        |        |
| Kirurgi                                              | 14      | ..                          | ..        | 16      | 11    | 20                    | 15     | 19     |
| <i>Plastic surgery</i>                               |         |                             |           |         |       |                       |        |        |
| Plastik kirurgi                                      | 1       | ..                          | ..        | 0       | ..    | 3                     | 1      | 1      |
| <i>Gynaecology and obstetrics</i>                    |         |                             |           |         |       |                       |        |        |
| Gynækologi og obstetrik                              | 9       | ..                          | ..        | 7       | 11    | 14                    | 10     | 13     |
| <i>Orthopaedic surgery</i>                           |         |                             |           |         |       |                       |        |        |
| incl. hand surgery                                   |         |                             |           |         |       |                       |        |        |
| Ortopædisk kirurgi,<br>inkl håndkirurgi              | 10      | ..                          | ..        | 1       | 8     | 11                    | 7      | 11     |
| <i>Ophthalmology</i>                                 |         |                             |           |         |       |                       |        |        |
| Øjensygdomme                                         | 5       | ..                          | ..        | 3       | 4     | 9                     | 7      | 7      |
| <i>Ear, nose and throat</i>                          |         |                             |           |         |       |                       |        |        |
| Øre næse hals                                        | 6       | ..                          | ..        | 4       | ..    | 6                     | 5      | 6      |
| <i>Psychiatry</i>                                    |         |                             |           |         |       |                       |        |        |
| Psykiatri                                            | 2       | 6                           | 4         | 14      | 23    | 26                    | 22     | 20     |
| <i>Skin and sexually transmitted diseases</i>        |         |                             |           |         |       |                       |        |        |
| Hud og kønssygdomme                                  | 3       | ..                          | ..        | 2       | ..    | 5                     | 3      | 4      |
| <i>Neurology</i>                                     |         |                             |           |         |       |                       |        |        |
| Neurologi                                            | 3       | ..                          | ..        | 3       | ..    | 5                     | 4      | 3      |
| <i>Oncology</i>                                      |         |                             |           |         |       |                       |        |        |
| Onkologi                                             | 2       | ..                          | ..        | 2       | 4     | 5                     | 2      | 4      |
| <i>Anaesthetics</i>                                  |         |                             |           |         |       |                       |        |        |
| Anæstesiologi                                        | 14      | ..                          | ..        | 10      | 11    | 19                    | 13     | 13     |
| <i>Radiology</i>                                     |         |                             |           |         |       |                       |        |        |
| Radiologi                                            | 8       | ..                          | ..        | 8       | 4     | 12                    | 10     | 11     |
| <i>Clinical laboratory specialties</i>               |         |                             |           |         |       |                       |        |        |
| incl. pathology                                      |         |                             |           |         |       |                       |        |        |
| Kliniske/laboratoriespecialer,<br>inkl patologi      | 9       | ..                          | ..        | 7       | ..    | 17                    | 8      | 9      |
| <i>Other specialties</i>                             |         |                             |           |         |       |                       |        |        |
| Andre specialer                                      | 2       | 73                          | 28        | 3       | 15    | 8                     | 12     | 9      |
| <i>Specialists in total</i>                          |         |                             |           |         |       |                       |        |        |
| Specialister i alt                                   | 187     | 136                         | 122       | 130     | 174   | 283                   | 196    | 233    |
| <i>Physicians without specialist authorization</i>   |         |                             |           |         |       |                       |        |        |
| Læger uden<br>specialistgodkendelse                  | 117     | 52                          | 25        | 84      | 87    | 78                    | 152    | 92     |
| <i>Physicians in total within NACE 85.1 and 85.3</i> |         |                             |           |         |       |                       |        |        |
| Læger i alt indenfor NACE 85.1<br>og 85.3            | 304     | 188                         | 146       | 214     | 261   | 361                   | 348    | 325    |

1 2003

2 Data based on the register of physicians at the Directorate of Health. The newest specialty chosen for those with more than one specialty.

1 2003

2 Data er baseret på Helse Direktoratets lægeregister. Den nyeste specialisering er valgt, hvor der er flere end en specialisering.

Source: D: National Board of Health; FI: Hospital Board; G: Directorate for Health; F: STAKES; Å: Government of the Åland Islands; I: Directorate of Health; N: Statistics Norway; S: National Board of Health and Welfare

**Table 5.2.5 Employed physicians 2004**  
Erhvervsaktive læger 2004

|                                                                                                                                                                                                                                        | Denmark | Faroe Islands <sup>1)</sup> | Greenland | Finland | Åland | Iceland | Norway              | Sweden |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------|-----------|---------|-------|---------|---------------------|--------|
| <i>Physicians employed in hospitals (NACE 85.1 and 85.3)</i><br>Læger beskæftiget på hospitaler (NACE 85.1 og 85.3)                                                                                                                    | 11 343  | 63                          | 85        | 7 300   | 47    | 768     | 9 656               | ..     |
| <i>General practitioners (NACE 85.1 and 85.3)</i><br>Læger der arbejder som alment praktiserende læger (NACE 85.1 og 85.3)                                                                                                             | 3 867   | 27                          | ..        | 3 700   | 16    | 228     | 3 041 <sup>2)</sup> | 4 917  |
| <i>Heraf uden specialistgodkendelse</i>                                                                                                                                                                                                |         |                             |           |         |       |         |                     |        |
| <i>Other physicians employed outside hospitals (mainly privately practising specialists) (NACE 85.1 and 85.3)</i><br>Andre læger der arbejder udenfor hospitaler (hovedsageligt privat praktiserende speciallæger) (NACE 85.1 og 85.3) | 1 229   | -                           | ..        | 2 800   | 5     | ..      | 2 557               | ..     |
| <i>Physicians employed in administrative medicine (NACE 75.1)</i><br>Læger beskæftiget med administrativ medicin (NACE 75.1)                                                                                                           | 204     | 1                           | 2         | -       | 1     | ..      | 1 644               | 578    |
| <i>Physicians employed in medical research, teaching etc. (NACE 80.3, 73.1 and 24.4)</i><br>Læger beskæftiget med medicinsk forskning, undervisning m.v. (NACE 80.3, 73.1 og 24.4)                                                     | 748     | -                           | ..        | -       | ..    | ..      | 591                 | 1 424  |
| <i>Physicians employed within all other NACE codes</i><br>Læger beskæftiget på alle andre NACE-koder                                                                                                                                   | 1 056   | -                           | ..        | -       | ..    | ..      | 793                 | 1 628  |

1 2003

2 Includes only physicians who have practice as their main employment. The others are placed under "Other physicians employed outside hospitals (mainly privately practising specialists) (NACE 85.1 and 85.3)"

1 2003

2 Omfatter kun læger som har almen praksis som sin hovedbeskæftigelse. De øvrige vil være placeret under "Andre læger der arbejder udenfor hospitaler (hovedsageligt privat praktiserende speciallæger) (NACE 85.1 og 3)"

Source: D: National Board of Health; FI: Hospital Board; G: Directorate for Health; F: STAKES; Å: Government of the Åland Islands; I: Directorate of Health; N: Statistics Norway; S: National Boards of Health and Welfare

### 5.3 Capacity and services in hospitals

For many years, there has been a trend in the Nordic countries towards fewer hospital beds. Resources have been concentrated in fewer units, often involving a division of work in the most specialized areas. Units have often been merged administratively, not necessarily leading to fewer physical units. No hospitals have been closed down in Norway during the last few years, but some of the existing hospitals have become smaller.

Another trend in the Nordic countries is that psychiatric hospitals have been closed down, however, to varying degrees.

Hospital beds are organized somewhat differently in Finland, Iceland and Greenland than in the other countries. A number of beds are attached to health centres, and these beds appear in the tables as beds in "other hospitals". Some of these beds are for care of elderly people, and they are similar to beds in nursing homes and old peoples' homes in the other countries. Particularly for Finland and Iceland, this gives a larger number of beds in relation to the population than in the other countries.

Hospital beds are divided into medical, surgical, psychiatric and other beds. It is clearly indicated that, particularly for Finland and Iceland, the category 'other', includes activities that are not included in the other countries.

The tables about hospital discharges and average length of stay apply to patients admitted to ordinary hospitals and specialized hospitals. This limitation has been

### 5.3 Kapacitet og ydelser i sygehusvæsenet

Det er et kendetegn ved de nordiske landes sygehusvæsen, at der i en årrække er blevet færre sengepladser, og ressourcerne er blevet samlet på færre enheder, og oftest med en arbejdsdeling på de mest specialiserede områder. Ofte er det tale om en organisatorisk administrativ sammenlægning, som ikke nødvendigvis behøver at medfører færre fysiske enheder. I Norge er der ikke nedlagt hospitaler de seneste år, men de eksisterende hospitaler er ofte blevet mindre.

Det er ligeledes et kendetegn, at egentlige psykiatriske hospitaler er under afvikling i de nordiske lande, dog i forskelligt tempo.

I Grønland, Finland og Island er strukturen dog lidt anderledes, idet der til sundhedscentre er knyttet et antal sengepladser, som i tabellerne er rubriceret under andre hospitaler. En del af disse sengepladser er dog plejepladser, som i de andre lande findes ved alderdoms- og plejehjemmene. Dette medfører, især for Finland og Islands vedkommende, at man får et betydeligt større antal sengepladser i forhold til befolkningen, end i de andre lande.

Sengepladserne ved sygehusene er fordelt på medicin, kirurgi, psykiatri og andet. Det fremgår klart, at det først og fremmest er Finland og Island som under rubrikken 'Andet' medregner aktiviteter, som ikke medtages af de øvrige lande.

Tabellerne over udskrivninger og gennemsnitlig liggetid omfatter indlagte patienter ved almindelige sygehuse og specialsygehuse. Denne afgrænsning er foretaget

done in order to improve comparability between the countries.

for at fremme sammenligneligheden mellem landene.

The trend is that the number of treatment places and the average length of stay have been reduced in ordinary hospitals.

Within psychiatric treatment there has been a trend towards the use of more outpatient treatment, so that the number of psychiatric beds has been reduced.

Tendensen er, at antallet af behandlingspladser og den gennemsnitlige liggetid reduceres på de almindelige sygehuse. Inden for den psykiatriske behandling har der været en udvikling hen imod mere ambulante behandlingsformer, hvorfor antallet af psykiatriske sengepladser er blevet reduceret.

## RESOURCES

**Table 5.3.1 Available hospital beds by speciality 2004**  
Disponible sengepladser ved sygehuse efter specialer 2004

|                                            | Denmark | Faroe Islands <sup>1)</sup> | Greenland         | Finland <sup>3)</sup> | Åland | Norway | Sweden |
|--------------------------------------------|---------|-----------------------------|-------------------|-----------------------|-------|--------|--------|
| <i>Number</i>                              |         |                             |                   |                       |       |        |        |
| <i>Antal</i>                               |         |                             |                   |                       |       |        |        |
| <i>Medicine</i>                            |         |                             |                   |                       |       |        |        |
| Medicin                                    | 9 206   | 93                          | 46                | 6 604                 | 54    | 6 846  | 14 344 |
| <i>Surgery</i>                             |         |                             |                   |                       |       |        |        |
| Kirurgi                                    | 6 652   | 95                          | 62                | 5 009                 | 47    | 6 324  | 8 237  |
| <i>Medicine and surgery in total</i>       |         |                             |                   |                       |       |        |        |
| Medicin og kirurgi ialt                    | 15 858  | 188                         | 108               | 11 613                | 101   | 13 170 | 22 581 |
| <i>Psychiatry</i>                          |         |                             |                   |                       |       |        |        |
| Psykiatri                                  | 3 498   | 76                          | 12                | 4 990                 | 32    | 2 653  | 4 507  |
| <i>Other</i>                               |         |                             |                   |                       |       |        |        |
| Andet                                      | -       | -                           | 286 <sup>2)</sup> | 20 227                | 98    | 355    | -      |
| <i>Total</i>                               |         |                             |                   |                       |       |        |        |
| I alt                                      | 19 356  | 264                         | 406               | 36 830                | 231   | 16 178 | 27 088 |
| <i>Beds per 100 00 inhabitants</i>         |         |                             |                   |                       |       |        |        |
| <i>Sengepladser pr. 100 000 indbyggere</i> |         |                             |                   |                       |       |        |        |
| <i>Medicine</i>                            |         |                             |                   |                       |       |        |        |
| Medicin                                    | 170     | 194                         | 81                | 126                   | 205   | 149    | 159    |
| <i>Surgery</i>                             |         |                             |                   |                       |       |        |        |
| Kirurgi                                    | 123     | 198                         | 109               | 96                    | 179   | 138    | 91     |
| <i>Psychiatry</i>                          |         |                             |                   |                       |       |        |        |
| Psykiatri                                  | 65      | 158                         | 21                | 95                    | 122   | 58     | 50     |
| <i>Other</i>                               |         |                             |                   |                       |       |        |        |
| Andet                                      | -       | -                           | 503               | 387                   | 372   | 8      | -      |
| <i>Total</i>                               |         |                             |                   |                       |       |        |        |
| I alt                                      | 358     | 550                         | 714               | 704                   | 878   | 353    | 301    |

1 2003

2 Excl. patient hotel.

3 The number of beds has been calculated by dividing the total number of bed days by 366.

1 2003

2 Ekskl. patienthotel.

3 Antallet af senge er beregnet ved at dividere det totale antal sengedage med 366.

Source: D: National Board of Health; FI: Hospital Board; G: Directorate for Health; F: STAKES; Å: Government of the Åland Islands; N: Statistics Norway; S: Swedish Association of Local Authorities and Regions.

**Table 5.3.2 Discharges, bed days and average length of stay in wards in ordinary hospitals and specialized hospitals 2004**

Udskrivninger, sengedage og gennemsnitlig liggetid på afdelinger ved almindelige sygehuse og specialsygehuse 2004

|                                           | Denmark <sup>1)</sup> | Faroe Islands | Greenland <sup>2)</sup> | Finland | Åland | Norway | Sweden |
|-------------------------------------------|-----------------------|---------------|-------------------------|---------|-------|--------|--------|
| <i>Discharges per 1 000 inhabitants</i>   |                       |               |                         |         |       |        |        |
| <i>Udskrivninger pr. 1 000 indbyggere</i> |                       |               |                         |         |       |        |        |
| <i>Medicine</i>                           |                       |               |                         |         |       |        |        |
| Medicin                                   | 102                   | 116           | 32                      | 77      | 96    | 87     | 72     |
| <i>Surgery</i>                            |                       |               |                         |         |       |        |        |
| Kirurgi                                   | 96                    | 111           | 76                      | 110     | 107   | 86     | 70     |
| <i>Psychiatry</i>                         |                       |               |                         |         |       |        |        |
| Psykiatri                                 | 8                     | 7             | 4                       | 9       | 17    | 5      | 9      |
| <i>Total</i>                              |                       |               |                         |         |       |        |        |
| I alt                                     | 206                   | 234           | 112                     | 196     | 219   | 176    | 161    |
| <i>Bed days per 1 000 inhabitants</i>     |                       |               |                         |         |       |        |        |
| <i>Sengedage pr. 1 000 indbyggere</i>     |                       |               |                         |         |       |        |        |
| <i>Medicine</i>                           |                       |               |                         |         |       |        |        |
| Medicin                                   | 570                   | 505           | ..                      | 405     | 481   | 506    | 363    |
| <i>Surgery</i>                            |                       |               |                         |         |       |        |        |
| Kirurgi                                   | 401                   | 441           | ..                      | 331     | 357   | 390    | 292    |
| <i>Psychiatry</i>                         |                       |               |                         |         |       |        |        |
| Psykiatri                                 | 237                   | 306           | ..                      | 335     | 381   | 190    | 158    |
| <i>Total</i>                              |                       |               |                         |         |       |        |        |
| I alt                                     | 1 208                 | 1 252         | ..                      | 1 071   | 1 219 | 998    | 949    |
| <i>Average length of stay</i>             |                       |               |                         |         |       |        |        |
| <i>Gennemsnitlig liggetid</i>             |                       |               |                         |         |       |        |        |
| <i>Medicine</i>                           |                       |               |                         |         |       |        |        |
| Medicin                                   | 6                     | 4             | 269                     | 5       | 5     | 6      | 5      |
| <i>Surgery</i>                            |                       |               |                         |         |       |        |        |
| Kirurgi                                   | 4                     | 4             | 492                     | 3       | 3     | 5      | 4      |
| <i>Psychiatry</i>                         |                       |               |                         |         |       |        |        |
| Psykiatri                                 | ..                    | 41            | 71                      | 39      | 23    | 35     | 18     |
| <i>Total</i>                              |                       |               |                         |         |       |        |        |
| I alt                                     | ..                    | 5             | 832                     | 5       | 6     | 6      | 6      |

1 2003

2 Figures for average length of stay only refer to Dronning Ingrid's Hospital.

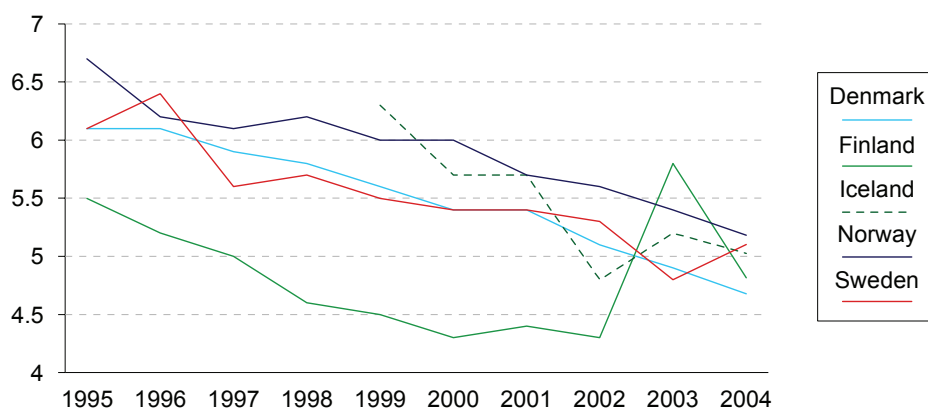
1 2003

2 Tallene for den gennemsnitlige liggetid omfatter kun Dronning Ingrid's Hospital.

Source: The national in-patient registers

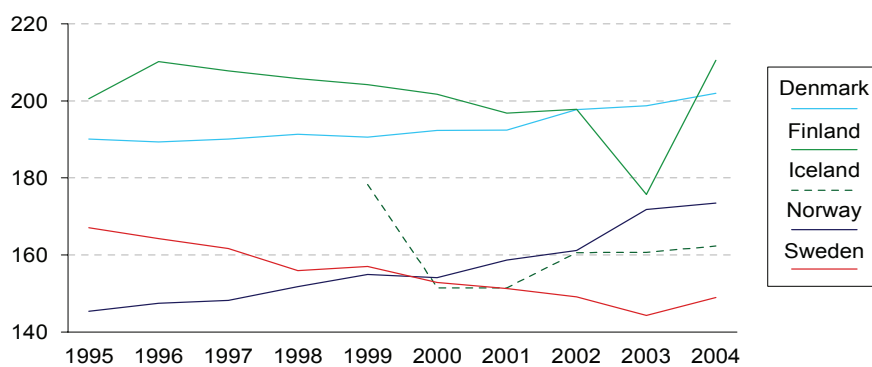
Kilde: De nationale patientregistre

**Figure 5.3.1 Average length of stay in somatic wards 1995-2004**  
Gennemsnitlig liggetid på somatiske afdelinger 1995-2004



Source: Table 3.4.1  
Kilde: Tabel 3.4.1

**Figure 5.3.2 Number of discharges from somatic wards, per 1 000 inhabitants 1995-2004**  
Udskrivninger fra somatiske afdelinger pr. 1 000 indbyggere 1995-2004



Source: Table 3.4.1  
Kilde: Tabel 3.4.1

**Table 5.3.3 Discharges from hospitals\* by sex and age, per 1 000 inhabitants in the age group 2004**

Udskrivninger fra sygehuse\* efter køn og alder,  
pr. 1 000 indbyggere i aldersgruppen 2004

|                         | Denmark | Faroe Islands | Finland | Åland | Iceland <sup>1)</sup> | Norway | Sweden |
|-------------------------|---------|---------------|---------|-------|-----------------------|--------|--------|
| <i>Age</i> <i>Alder</i> |         |               |         |       |                       |        |        |
| <i>Men</i>              |         |               |         |       |                       |        |        |
| Mænd                    |         |               |         |       |                       |        |        |
| 0-14                    | 129     | 169           | 132     | 152   | 141                   | 97     | 71     |
| 15-44                   | 89      | 101           | 112     | 92    | 49                    | 80     | 51     |
| 45-64                   | 204     | 224           | 225     | 175   | 124                   | 178    | 134    |
| 65-69                   | 379     | 383           | 375     | 357   | 282                   | 333    | 275    |
| 70-74                   | 496     | 501           | 475     | 440   | 390                   | 426    | 378    |
| 75-79                   | 635     | 632           | 589     | 595   | 534                   | 530    | 478    |
| 80+                     | 774     | 683           | 735     | 789   | 628                   | 699    | 645    |
| <i>Total</i>            |         |               |         |       |                       |        |        |
| I alt                   | 186     | 196           | 199     | 190   | 128                   | 159    | 134    |
| <i>Women</i>            |         |               |         |       |                       |        |        |
| Kvinder                 |         |               |         |       |                       |        |        |
| 0-14                    | 103     | 130           | 102     | 118   | 129                   | 79     | 58     |
| 15-44                   | 193     | 228           | 186     | 198   | 190                   | 160    | 131    |
| 45-64                   | 183     | 217           | 209     | 178   | 160                   | 165    | 124    |
| 65-69                   | 300     | 365           | 298     | 247   | 287                   | 267    | 217    |
| 70-74                   | 389     | 434           | 382     | 342   | 363                   | 324    | 292    |
| 75-79                   | 472     | 518           | 472     | 494   | 405                   | 413    | 375    |
| 80+                     | 597     | 540           | 529     | 701   | 515                   | 534    | 518    |
| <i>Total</i>            |         |               |         |       |                       |        |        |
| I alt                   | 217     | 239           | 222     | 241   | 196                   | 187    | 163    |

1 Discharges for stays in hospital shorter than 90 days. 1 Kun udskrivninger ved indlæggelsestider på mindre end 90 dage.

\* Comprises somatic wards in ordinary hospitals and in specialized somatic hospitals.

\* Omfatter somatiske afdelinger ved almindelige sygehuse og ved somatiske specialsygehuse.

Source: The national in-patient registers

Kilde: De nationale patientregistre

## RESOURCES

**Table 5.3.4 Bed days in hospitals\* by sex and age,  
per 1 000 inhabitants in the age group 2004**

Sengedage på sygehuse\* efter køn og alder,  
pr. 1 000 indbyggere i aldersgruppen 2004

|                  | Denmark | Faroe Islands | Finland | Åland | Iceland <sup>1)</sup> | Norway | Sweden |
|------------------|---------|---------------|---------|-------|-----------------------|--------|--------|
| <i>Age</i> Alder |         |               |         |       |                       |        |        |
| <i>Men</i>       |         |               |         |       |                       |        |        |
| Mænd             |         |               |         |       |                       |        |        |
| 0-14             | 389     | 286           | 508     | 498   | 390                   | 380    | 277    |
| 15-44            | 281     | 632           | 535     | 247   | 167                   | 283    | 162    |
| 45-64            | 949     | 1 397         | 1 124   | 734   | 627                   | 858    | 620    |
| 65-69            | 2 062   | 3 774         | 1 897   | 2 038 | 1 785                 | 1 992  | 1 524  |
| 70-74            | 2 929   | 4 077         | 2 466   | 2 787 | 2 872                 | 2 770  | 2 276  |
| 75-79            | 3 880   | 6 434         | 3 303   | 3 764 | 4 391                 | 3 640  | 3 062  |
| 80+              | 5 207   | 6 958         | 6 754   | 6 200 | 6 689                 | 4 987  | 4 472  |
| <i>Total</i>     |         |               |         |       |                       |        |        |
| I alt            | 874     | 1 249         | 1 036   | 911   | 699                   | 823    | 697    |
| <i>Women</i>     |         |               |         |       |                       |        |        |
| Kvinder          |         |               |         |       |                       |        |        |
| 0-14             | 330     | 245           | 359     | 257   | 363                   | 333    | 234    |
| 15-44            | 563     | 899           | 753     | 618   | 519                   | 582    | 383    |
| 45-64            | 820     | 1 330         | 876     | 731   | 709                   | 821    | 565    |
| 65-69            | 1 699   | 2 609         | 1 382   | 1 243 | 1 903                 | 1 611  | 1 215  |
| 70-74            | 2 431   | 4 506         | 1 943   | 2 123 | 2 823                 | 2 157  | 1 800  |
| 75-79            | 3 270   | 5 867         | 2 431   | 3 737 | 3 778                 | 2 946  | 2 510  |
| 80+              | 4 566   | 7 258         | 3 059   | 5 969 | 5 954                 | 3 948  | 3 886  |
| <i>Total</i>     |         |               |         |       |                       |        |        |
| I alt            | 1 015   | 1 496         | 994     | 1 153 | 933                   | 974    | 822    |

1 Bed days of discharges for stays in hospital shorter than 90 days.

1 Sengedage for udskrivninger ved indlæggelsestider på mindre end 90 dage.

\* Definition, see table 3.4.2

\* Definition, se tabel 3.4.2

Source: The national in-patient registers

Kilde: De nationale patientregistre

THEME SECTION

## SECTION B

## Out-patient care – with focus on primary health care

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## Preface

At its plenary meeting in 2004, NOMESCO decided that the theme for Health Statistics in the Nordic Countries 2006 should be non-admitted patients, particularly in primary health care (out-patient care – with focus on primary health care. Sweden accepted the leadership with Lars Berg, Centre for Epidemiology, the National Board of Health and Welfare, Sweden, as project leader together with a reference group comprising the following members:

Mette Thorup Eriksen, replaced by Ditte Løvenborg Strøbæk, National Board of Health, Denmark; Gudrun Kr. Gudfinnsdottir, Sigridur Haraldsdottir, replaced by Lilja Bjarklind Kjartansdóttir, Directorate of Health, Iceland; Vegard Nore, and Guri Spilhaug, the later replaced by Asbjørn Haugsbø, National Directorate for Health and Social Affairs, Norway; Mika Gissler and Sanna-Mari Saukkonen, STAKES (National Research and Development Centre for Welfare and Health), Finland; and Johannes Nielsen, NOMESCO.

The following people have participated at some of the meetings: Hannu Rintanen, STAKES, Finland and Anders Grimsmo, Electronic Patient Record Centre at the Norwegian University of Science and Technology, Trondheim, and Olav Lund, Norwegian Directorate for Health and Social Affairs, Norway; and Svanhildur Thorsteinsdottir, Directorate of Health, Iceland.

## Förord

NOMESCO beslutade vid sitt plenarmöte år 2004 att temat i Hälso-statistik från de nordiska länderna år 2006 skulle avhandla icke inlagda patienter, särskilt primärvård (patienter i öppen vård – med fokus på primärvård). Sverige påtog sig projektledaransvaret med Lars Berg, Epidemiologiskt Centrum, Socialstyrelsen, Sverige som ansvarig tillsammans med en referensgrupp som bestått av följande medlemmar:

Mette Thorup Eriksen, ersattes av Ditte Løvenborg Strøbæk, Sundhedsstyrelsen, Danmark; Gudrun Kr. Gudfinnsdottir, Sigridur Haraldsdottir, ersattes av Lilja Bjarklind Kjartansdóttir, Helse-direktoratet, Island; Vegard Nore, samt Guri Spilhaug, varav den senare ersattes av Asbjørn Haugsbø, Sosial- og helsedirektoratet, Norge; Mika Gissler och Sanna-Mari Saukkonen, Stakes, Finland; samt Johannes Nielsen, NOMESCO.

Vid enstaka arbetsmöten har även följande deltagit: Hannu Rintanen, Stakes, Finland och Anders Grimsmo, Elektronisk pasientjournalsenter ved Norges teknisk-naturvitenskapelig universitet i Trondheim, och Olav Lund, Sosial- og helsedirektoratet, Norge; samt Svanhildur Thorsteinsdottir, Helse-direktoratet, Island.

## Introduction

For many years, NOMESCO's plenary assembly has discussed the possibility for producing reliable and comparable data on primary health services in the Nordic countries [1]. However, the organization of primary health services is so different in each country, that it has not been possible up to now.

Thus in 1995, a seminar was held [2] with representatives from the primary health services in the Nordic countries. The delegates discussed the possibility of collecting information from the electronic records of doctors in general practice in a joint Nordic project. The results of this project were presented in the theme section in NOMESCO's Health Statistics in the Nordic Countries 1996 [3] and later in a scientific article [4]. The theme section can be found on NOMESCO's website ([www.nom-nos.dk](http://www.nom-nos.dk) under "Statistics"). In the project, data was collected during a four-week period from 49 doctors in general practice.

At the NOMESCO planning meeting 3-4 December 1998 in Helsingfors, a working group was appointed to produce a proposal for basic statistical data. Since health services for non-admitted patients are organized very differently in the Nordic countries, it was decided that the data should not be limited just to statistics about consultations to doctors in general practice. To describe the services by doctors in general practice it is necessary to include all out-patient care (non-admitted patients), irrespective of how the services are organized.

## Inledning

NOMESCOs plenarforsamling har i många år diskuterat möjligheten att ta fram pålitliga och jämförbara data om verksamheten i primärvården i de nordiska länderna [1]. Emellertid är primärvården i sin organisationsform så olika utformad från land till land, att det hittills inte har varit möjligt.

År 1995 hölls därför ett seminarium [2] med representanter från primärvården i de nordiska länderna. Deltagarna dryftade möjligheten till att samla in information hämtad från allmänläkarnas dattajournaler i ett gemensamt nordiskt projekt. Resultatet av detta projekt redovisades i temarapporten i NOMESCOs hälsostatistikrapport för år 1996 [3] och senare i en vetenskaplig artikel [4]. Temasektionen finns på NOMESCOs webbplats ([www.nom-nos.dk](http://www.nom-nos.dk) under "Statistics"). I projektet insamlades data från en 4-veckorsperiod med totalt 49 deltagande allmänläkare.

Vid NOMESCOs planläggningsmöte den 3-4:e december 1998 i Helsingfors tillsattes en arbetsgrupp, som skulle utarbeta ett förslag till ett statistikunderlag. Då servicen till icke-inlagda patienter är så olika organiserat i de nordiska länderna beslutades att man inte skulle inskränka sig till enbart statistik om besök till allmänläkare. Om man skall beskriva allmänläkarverksamheten måste statistiken omfatta all behandling och service som ges till icke-inlagda patienter (patienter i öppen vård) oavsett hur detta serviceutbud är organiserat.

The working group held three meetings: 22 February 1999 in Copenhagen, 20 August 1999 in Reykjavik and 29 October 1999 in Oslo. In the group's statement to the NOMESCO plenary meeting, the following proposal for further work with health statistics on primary health services was put forward:

*“In order to obtain more information about the differences in the organization of ambulatory care in the health services, and to obtain better statistics for comparing health services in the Nordic countries, the health and statistics authorities are encouraged to contribute to NOMESCO's development of comparable statistics for health services for non-admitted patients and distribution of service supply.*

*NOMESCO will collect and evaluate data, using the definitions and descriptions of variables used in this report. On condition that NOMESCO's planning meeting approves the proposal, it is recommended that NOMESCO contacts the relevant national authorities in writing, and requests a written reply about whether and to what extent the proposed data can be provided.”*

The working group's report was approved and discussed at the plenary meeting in 2000. The national health and statistics authorities were contacted, with a proposal to collect basic statistics in this area. The national responses were that there was urgent need for better statistics, but the requested data were not available at that time. At NOMESCO's plenary meetings 2001-2002, it was therefore decided to wait for the ongoing development works in the different countries.

Arbetsgruppen avhöll följande tre möten: Den 22:a februari 1999 i Köpenhamn, den 20:e augusti 1999 i Reykjavik och den 29:e oktober 1999 i Oslo. I sin redovisning till NOMESCOs plenarmöte redovisade man följande förslag för fortsatt arbete med hälsostatistik från primärvården:

*“For at opbygge større viden om forskellene i de nordiske landes organisation af den ambulante behandling i sundhedssektoren og for at skaffe et bedre grundlag for sammenligninger de nordiske landes sundhedsvæsen imellem opfordres de nordiske landes sundheds- og statistikmyndigheder til at bidrage til NOMESCO's udvikling af en sammenlignelig statistik over sundhedsvæsenets ydelser til ikke-indlagte patienter og disse ydelsers fordeling på udbydere.*

*NOMESCO vil indsamle og vurdere data med anvendelse af denne rapportes beskrivelse af definitioner og variabelbeskrivelser. Under forudsætning af at NOMESCO's planlægningsmøde godkender forslaget foreslås det, at NOMESCO henvender sig skriftlig til de relevante nationale myndigheder og anmoder om et skriftligt svar om hvordan og i hvilket omfang de foreslåede data kan leveres.”*

Arbetsgruppens rapport godkändes och diskuterades vid plenarmötet år 2000. En hänvändelse gjordes till de nationella hälso- och statistikmyndigheter, med förslag om insamling av en minimalistisk statistik på området. De nationella svaren gav vid handen att det fanns ett starkt behov av bättre statistik, men att förutsättningarna för närvarande inte fanns. NOMESCOs plenarmöten år 2001-2002 beslöt därför att avvakta pågående utvecklingsarbeten i de enskilda länderna.

NOMESCO's plenary meeting in 2003 considered that the time was suitable for a new attempt. A new working group was appointed to work further with Nordic statistics for non-admitted patients.

This new working group has held the following meetings: 28 October 2003 in Copenhagen, 26 February 2005 in Stockholm, 21 November 2005 in Oslo and 13-14 March 2006 in Reykjavik.

Vid NOMESCOs plenarmöte 2003 bedömde man att tiden var mogen för ett nytt försök. En ny arbetsgrupp tillsattes som skulle arbeta vidare med frågan om nordisk statistik för icke-inlagda patienter.

Den nya arbetsgruppen har hållit fyra möten: den 28:e oktober 2003 i Köpenhamn, den 26 februari 2005 i Stockholm, den 21 november 2005 i Oslo samt den 13-14 mars 2006 i Reykjavik.

## Organization

In the Nordic countries, health care services are public. All the countries have well-developed primary health care services. In addition to services by doctors in general practice, there are preventive services for mothers and children and for school children.

Organization of out-patient health care services ("non-admitted patients") in the Nordic countries is described in the first part of this section. The countries are presented in alphabetical order. At the end of the section some tables are presented, which show physician density and the number of practice sites. There is no discussion of differences and similarities in this section. This is given in the discussion section.

Although some of the countries have not been able to provide statistics according to age, gender and diagnosis for non-admitted patients, it is important to give a description of the organization of health services for these countries also.

## Organisation

I de nordiska länderna är hälso- och sjukvården ett offentligt uppdrag. Alla länderna har en väletablerad primärvård. Som supplement till allmänläkarevården finns förebyggande insatser för mödrar och barn och för skolbarn.

Organisation av den öppna hälso- och sjukvården ("icke inlagda patienter") i de nordiska länderna beskrivs först i detta avsnitt. Länderna presenteras i sedvanlig alfabetisk ordning. Som avslutning till organisationsavsnittet presenteras några tabeller fram kring läkartäthet och mottagningsstorlek. Däremot förs inte några diskussioner kring skillnader och likheter i detta avsnitt, utan detta lämnas till diskussionsavsnittet.

Även om samtliga länder inte har kunnat redovisa ålders-, köns- och diagnosfördelad statistik från den öppna vården är det ett värde att inkludera även dessa länder i en sammanhållen organisationsbeskrivning.

But concepts and terms are used in different ways in the Nordic countries. This affect the statistics and different ways to classify the statistical data are used. "Health centres" in Sweden and Finland is responsible for all primary health care services, while health centres in Norway as a rule only provide municipal preventive services. To avoid misunderstanding the english term "doctor in general practice" is used in the following for specialists in family medicine.

**DENMARK:** The state has responsibility for legislation, supervision and national guidelines. The counties have responsibility for hospital services, health insurance and special nursing homes. The municipalities have responsibility for health care personnel, nursing home personnel, health services for children and school health services.

According to the Health Insurance Act, primary contact shall always be to a doctor in general practice. Patients shall only contact the hospital directly in the case of acute illness and injury.

All Danish citizens can choose either group 1 or group 2 insurance. All people with group 1 insurance have the right to be on the list of a doctor in general practice, if the distance between their place of residence and the practice site is less than 15 kilometres. Doctors in general practice own their practice site, and work either alone or with a secretary or practice nurse.

Doctors are available on call outside normal consulting hours. In cases of emergency, patients can consult a specialist medical practitioner or a hospital special-

Begrepp och termer används olika i de nordiska länderna Detta påverkar statistiken, och man använder olika indelningsgrunder för sina statistiska data. En "vårdcentral" i Sverige och "hälsovårdscentral" i Finland har ansvar för all primärvårdsservice, medan "hälso-central" i Norge som regel endast omfattar kommunens förebyggande verksamhet. För att undvika missförstånd används på engelska termen "doctor in general practice" för specialister i allmänmedicin (familjemedicin).

**DANMARK:** Staten ansvarar för lagar, tillsyn och riktlinjer, amterna för sjukhusväsande, sjukförsäkring och vissa speciella sjukhem. Kommunerna ansvarar för sjukvårdspersonal, sjukhempersonal, sjukhem samt barn- och skolhälsovård.

Enligt sjukförsäkringslagen skall primärkontakten alltid vara en allmänläkare, och enbart vid akut sjukdom och skada kan man vända sig direkt till sjukhusen.

Alla danska medborgare kan välja antingen att vara grupp 1- eller grupp 2-försäkrade. Alla grupp 1-försäkrade har rätt att lista sig hos en allmänläkare, om avståndet mellan bostad och läkarmottagningen är maximalt 15 kilometer. Allmänläkarna äger själva sin mottagning, och arbetar helt ensamma eller har en sekreterare eller sjuksköterska till hjälp.

Utanför mottagningstid finns tillgång till jourhavande läkare. Vid akut sjukdom där behov föreligger kan man söka en praktiserande specialistläkare eller specialistlä-

## OUT -PATIENT CARE – with focus on primary health care

ist. The exceptions to this rule are eye specialists and ear, nose and throat specialists. Patients can contact these specialists directly. People with group 2 insurance are free to consult specialists.

Visits and consultations to doctors in general practice and specialist medical practitioners who have a contract with the health insurance, are free.

Pharmaceutical products, dental treatment, physiotherapy services, chiropractor services, psychology services and foods for special medical purposes are subsidised through health insurance. There are user charges for treatment from chiropodists, chiropractors and psychologists, that are determined according to an agreement with the health insurance.

Pregnancy check-ups are provided by doctors in general practice, specialists and midwives. Health check-ups for children and vaccinations are provided by doctors in general practice, according to a contract with the health insurance. Family planning and family counselling are provided by doctors in general practice and specialists, and also by midwives and nurses.

School health services and occupational health services are regulated by law. The municipalities have responsibility for school health services, which are usually provided by doctors in general practice and nurses.

Nursing homes are run by the municipalities, but there are a large number of private nursing homes that are run under contract.

kare vid ett sjukhus. Undantag från denna regel är ögonspecialistläkare och öron-näsa-halsspecialistläkare, dit patienten själv kan vända sig direkt. Grupp 2-försäkrade kan fritt söka specialistläkare.

Besök och konsultationer till allmänläkare, och praktiserande specialistläkare som har ett avtal med sjukförsäkringen, är gratis.

Vidare ger sjukförsäkringen bidrag till medicin, tandläkarhjälp, sjukgymnastik, kiropaktorhjälp, psykologhjälp och speciallivsmedel. Behandling hos fotvårdare, kiropaktorer och psykologer sker med en avgift bestämd som är avtalad med sjukförsäkringen.

Graviditetskontroller görs av allmänläkare, specialistläkare eller barnmorska. Hälsoundersökningar av barn och vaccinationer görs av allmänläkarna, enligt avtal med sjukförsäkringen. Familjeplanering och -rådgivning ges av allmänläkare eller specialistläkare, men även av barnmorskor och sjuksköterskor.

Skol- och företagshälsovård regleras i lag. Kommunerna ansvarar för skolhälsovård, och sköts i regel av allmänläkare och sjuksköterskor.

Sjukhem drivs av kommunerna, men det finns ett betydligt antal privata sjukhem, som drivs med avtal.

In Denmark there are no health centres or any in-patient facilities with beds that are run by doctors in general practice.

Services for alcohol and drug abusers, occupational health services, student health services and prison health services are not provided by doctors in general practice.

Hospital services are regulated by the county councils and the Joint Metropolitan Hospital Service. There are some private hospitals, that usually have a contract with the public services.

**THE FAROE ISLANDS:** The health services are run by the Government of the Faroe Islands, and are organized in a similar way to health services in Denmark. However, doctors in general practice are public employees and are remunerated by the health insurance scheme according to fee-for-service. Doctors in general practice work alone or at health centres.

Hospital beds are only to be found in the Faroe Island's three hospitals. As in Denmark, consultations to doctors in general practice and hospital treatment are free. However, the patients partly pay for pharmaceutical products and some other services.

Maternity care, child health services and school health services are provided by doctors in general practice together with midwives and nurses.

There are no occupational health services.

No statistics are available for consultations with doctors in general practice according to diagnosis, or for out-patient treatment in hospitals.

Det finns inga hälsocentraler i Danmark och inte heller några vårdavdelningar med sängplatser som sköts av allmänläkarna.

Missbruksvård, företagshälsovård, studenthälsovård och fängelsehälsovård sköts ej av allmänläkarna.

Sjukhusväsendet regleras av landstingen (amterna) och Hovedstadens Sygehusfaelleskab. Enstaka privata sjukhus finns, i regel med avtal.

**FÄRÖARNA:** Det Färöiska hälso- och sjukvårdssystemet drivs av Färöarnas Landsstyrelse och är en uppbyggd på ungefär motsvarande sätt som i Danmark. Dock är allmänläkare offentlig anställda och får ersättning från sjukförsäkringen efter utförda tjänst. Allmänläkarna arbetar ensamma eller vid vårdcentraler.

Sängplatser bara på Färöarnas tre sjukhus. På motsvarande sätt som i Danmark erbjuds gratis läkarbesök och sjukhusvård. Däremot betalar patienten själv en del av kostnaden för läkemedel och vissa andra tjänster.

Mödra-, barn- och skolhälsovård sköts av de allmänläkarna tillsammans med barnmorskor och sjuksköterskor.

Det finns heller ingen företagshälsovård.

Det finns ingen diagnosrelaterad statistik för läkarbesök och för den ambulanta behandlingen vid sjukhusen.

## OUT -PATIENT CARE – with focus on primary health care

**GREENLAND:** Health services in Greenland are run by the Greenland “Home Rule”, which also employs the staff. Health services are divided into 16 health districts, each with a small hospital. These hospitals function in practice as health centres, and are normally exclusively run by doctors in general practice. Essential surgical procedures are also carried out in the health centres.

There is only one hospital in Greenland (in Nuuk). There are no private health services in Greenland.

Maternity services, child health services and school health services are provided in health centres/district hospitals. There are no occupational health services.

All hospital services and pharmaceutical products are free in Greenland.

The available statistics on contacts, consultations and diagnoses are limited.

**FINLAND:** In accordance with the Public Health Act from 1972, the municipalities have responsibility for community health services. The municipalities can co-operate with other municipalities, or can buy services from another municipality.

The municipalities have responsibility for health education, screening and health surveys, services by doctors in general practice, out-of-hours services, mental health services that can be provided in health centres, ambulance services, emergency services, school health services, student health services, occupational health services and dental services.

**GRÖNLAND:** Hälso- och sjukvården i Grönland hör under det Grönländska ”hemmasstyret”, som även anställer de anställda. Hälso- och sjukvården är indelad i 16 sjukvårdsdistrikt, som till sig har knutna mindre sjukhus. Dessa fungerar i praktiken som hälsocentraler och är normalt enbart bemannade av allmänpraktiserande läkare. Vid hälsovårdscentralerna genomförs även nödvändiga kirurgiska ingrepp.

Det finns enbart ett sjukhus på Grönland (i Nuuk). Det finns inget privat utbud av hälso- och sjukvård i Grönland.

Vid sundhetscentrerna/distriktssjukhusen erbjuds mödra-, barns och skolhälsovård. Företagshälsovård finns inte.

Alla sjukvårdstjänster inklusive läkemedel är gratis på Grönland.

De statistiska uppgifterna om kontakter, besök och diagnoser är sparsam.

**FINLAND:** Enligt folkhälsolagen från 1972 ansvarar kommunen för folkhälsoarbetet. Kommunerna kan bilda en samkommun för uppgiften, eller köpa tjänsten av annan kommun.

Kommunen ansvarar för hälsorådgivning, screening och andra massundersökningar, allmänläkarvård, jourverksamhet och sådana mentalvårdstjänster som det är ändamålsenligt att tillhandahålla vid en hälsovårdscentral, sjuktransporter samt medicinsk räddningsverksamhet, skolhälsovård, studenthälsovård och företagshälsovård och tandvård.

Since March 2005, patients shall be able to obtain immediate contact with health centres during normal working hours on normal working days. The need for treatment shall be assessed by a person with health qualifications within three working days from when the patient contacted the health centre.

Health centres provide services by doctors in general practice, and some of them also provide specialist services, nursing care and health prevention services, laboratory services etc.

The services provided at health centres fall into the following sections: advice bureaux for child welfare, maternity care and family counselling, school health services, student health services, occupational health services, home nursing services, mental health services, physiotherapy and other non-admitted patient services (for example consultations and out-of-hours services).

Some health centres provide all the services themselves, while some municipalities buy all health centre services from a private company.

According to the Specialized Health Services Act, all municipalities have a duty to ensure that all the inhabitants receive necessary specialist care. All municipalities have to belong to a health district (20 districts, excluding Åland) in order to be able to organize specialized health services. Each health district has a central hospital. Five of these are university hospitals that provide highly specialized health care.

Sedan mars 2005 ska patienten omedelbart få kontakt med hälsovårdscentralen under tjänstetid på vardagar. Vårdbehovet ska bedömas av en person med hälso- eller sjukvårdsutbildning senast den tredje vardagen efter att patienten kontaktat hälsovårdscentralen.

Hälsovårdscentraler erbjuder allmänläkartjänster, och vissa av dem även specialisttjänster, sjuksköterske- och hälsovårdartjänster, laboratorietjänster osv.

Hälsovårdscentralernas verksamhet delas in enligt följande: rådgivningsbyråer för barnavård, mödravård och familjerådgivning, skolhälsovård, studenthälsovård, företagshälsovård, hemsjukvård, mentalvård, fysioterapi och övriga öppenvårdsbesök (t.ex. mottagnings- och läkarjourbesök).

En del av hälsovårdscentralerna producerar alla tjänster själva, medan man i vissa kommuner köper hela hälsovårdscentralverksamheten inklusive serviceproduktionen av en privat serviceproducent.

Lagen om specialiserad sjukvård föreskriver att kommunen är skyldig att se till att dess invånare får behövlig specialistvård. Kommunen måste höra till ett sjukvårdsdistrikt (20 stycken, exklusive Åland) för att kunna anordna specialiserad sjukvård. Varje sjukvårdsdistrikt har ett centralsjukhus. Av dessa är fem universitetssjukhus som ger högspecialiserad sjukvård.

## OUT -PATIENT CARE – with focus on primary health care

Health districts organize and produce specialist services for the population in the district. Specialized health services are also provided to a certain extent at the health centres and within the private sector, in addition to the care given at the hospital in the health districts.

A referral is necessary to obtain specialized health care, with the exception of emergency care.

In addition to health centre services, there are private health services. Private health services have to comply with the legislation relating to private health services, and the provider must have authorization from the county council to supply health services.

In 2004 there were about 3 040 private health service producers, of which 1 000 provided out-patient services as doctors and about 670 provided occupational health services.

The Social Insurance Institution of Finland reimburses some of the costs for consultations with private service providers, when patients apply for reimbursement of the costs.

**ÅLAND:** Because of its home rule, Åland has its own health services legislation, with some exceptions. Public health services are regulated exclusively according to the Health Services Act of 1993. Detailed regulations are described each year in an operational plan.

Sjukvårdsdistriktet anordnar och producerar specialistläkartjänster för befolkningen i distriktet. Specialiserad sjukvård ges i viss utsträckning även på hälsovårdscentraler och inom den privata sektorn, utöver den vård som ges vid sjukvårdsdistriktens sjukhus.

Det krävs en läkarremiss för att få specialistsjukvård, utom i fall där det är fråga om akut vård.

Utöver hälsocentralverksamheten finns det privata producenter av hälso- och sjukvård. Den privata hälso- och sjukvården måste följa lagstiftningen om privat hälso- och sjukvård och vårdgivaren måste ha tillstånd från länsstyrelsen för att få tillhandahålla hälso- och sjukvård.

År 2004 fanns det totalt 3 040 privata vårdgivare, av vilka ungefär 1 000 hade läkarmottagning och cirka 670 var vårdgivare inom företagshälsovården.

Folkpensionsanstalten ersätter en del av de hälso- och sjukvårdsbesök som gjorts hos privata tjänsteleverantörer och för vars kostnader patienterna ansöker om ersättning.

**ÅLAND:** På grund av sitt självstyre har Åland sin egen lag för hälso- och sjukvården, dock med vissa undantag. Den offentliga hälso- och sjukvården regleras enligt landskapslagen om hälso- och sjukvården från 1993. Detaljerade bestämmelser beskrivs varje år i en verksamhetsplan.

Public health services are organized under a collective political organization – Åland Health Services (ÅHS). The Government of Åland has responsibility for ensuring that the population receives necessary treatment.

Primary health services are organized in the same way as in Finland, with community health services, which include preventive measures, maternity health services, child welfare services and school health services.

Services that cannot be produced locally are bought from producers in Finland and Sweden. The hospitals in Åland provide both out-patient and in-patient services.

Vaccination programmes are voluntary and are the same as those in Finland.

Occupational health services are organized as in Finland.

**ICELAND:** According to the Health Services Act of 1990, the Icelandic Government has responsibility for health services. The state employs most health care personnel and has responsibility for overall administration of health care institutions.

Health services in Iceland for out-patient care are provided by hospitals, health centres and private specialist.

There are three types of hospital in Iceland: highly specialized hospitals, of which there is one in Reykjavik and one in Akureyri, regional hospitals with some specialization, and local hospitals, many of which also function as old people's homes or nursing homes.

Den offentliga hälso- och sjukvården är underordnat en samlad politisk organisation – Ålands hälso- och sjukvård (ÅHS). Landskapsregeringen är huvudansvarig för att befolkningen får den nödvändiga sjukdomsbehandlingen.

Primärvården är uppbyggd på motsvarande sätt som i Finland, med folkhälsoarbete där preventiva insatser, mödra- och barnavård och skolhälsovård ingår.

Den service som inte kan produceras i egna enheter köps av producenter i Finland och Sverige. De åländska sjukhusen utför såväl öppen som sluten vård.

Vaccinationsprogram är frivilliga och förhållandena motsvara de finska.

Företagshälsovård organiseras som i Finland.

**ISLAND:** Enligt hälso- och sjukvårdslagen från 1990 är regeringen ansvarig för hälso- och sjukvårdservice. Staten anställer merparten av hälso- och sjukvårdspersonalen och är ansvarig för den övergripande administrationen av hälso- och sjukvårdsinstitutionerna.

Den isländska öppenvården tillhandahålls av sjukhus, hälsocentraler och privatpraktiserande specialister.

Det finns tre typer av sjukhus på Island: högt specialiserade sjukhus, varav ett i Reykjavik och ett i Akureyri, regionala sjukhus med ett visst mått av specialisering samt lokala sjukhus, varav många även fungerar som ålderdomshem eller sjukhem.

## OUT -PATIENT CARE – with focus on primary health care

According to the legislation, the country is divided into health regions, each with its own health centre. In rural areas, these centres are often combined with the local hospital, the home nursing service and other types of health services. These constitute a so-called health care institution.

Health centres are responsible for providing primary health services, including preventive services and general medical care.

As a general rule, the first contact with health centres is to doctors in general practice, but in some cases the first contact may be with a nurse. The majority of doctors in general practice are public employees and work in health centres. A few doctors also work in private health centres, with a contract with the public services.

Health centres have responsibility for providing child health services, maternal health services, school health services, vaccinations and family counselling. Home nursing services are also the responsibility of the health centres.

Occupational health services are the responsibility of employers, and services by doctors in general practice are bought from private specialists or from health centres.

Specialist services is provided in areas with greater population, mainly by private specialists.

Specialists also provide consultations in health centres in areas with less population. Most specialist services for out-

Enligt lagen indelas landet i sjukvårdsregioner, vardera med en egen hälsocentral. I landsbygden sköts dessa centra ofta gemensamt med det lokala sjukhuset, hemsjukvård och andra typer av hälso- och sjukvårdsservice. Dessa bildar vad som kallas en sjukvårdsinstitution.

Hälsocentraler är ansvariga för den primära servicen, inkluderande preventiva insatser och allmän medicinsk vård.

Som en generell regel sker den första kontakten med hälsocentralen med en allmänläkare, men i en del fall kan första kontakten vara med en sjuksköterska. Majoriteten av allmänläkare är offentliganställda och arbetar på hälsocentralerna. Endast ett fåtal allmänläkare arbetar vid privata hälsocentraler/mottagningar, och med avtal.

I hälsocentralernas arbetsuppgifter ingår barnhälsovård, mödrahälsovård, skolhälsovård, vaccinationer och familjerådgivning. Hemsjukvård är också hälsocentralernas ansvar.

Företagshälsovård är arbetsgivarens ansvar, och läkarinsatserna köps från praktiserande specialistläkare eller från hälsocentralerna.

Specialistbehandling tillhandahålls i de mer befolkade områdena, huvudsakligen genom privatpraktiserande specialister.

Specialister gör också besök i hälsocentralerna i de mindre befolkade områdena. Majoriteten av den specialiserade

patient care are provided by private specialists or at the hospitals.

Many private specialists also work part-time in hospitals. No referral is required for treatment by a specialist for non-admitted patients, so doctors in general practice do not function as “gatekeepers” in the Icelandic health care system.

**NORWAY:** According to the Municipal Health Services Act from 1982, municipal health services include public health services, excluding health services that are provided by the state, by the county authorities or by private organizations that have a contract with the municipality.

The municipalities shall provide services by doctors in general practice, out-of-hours services, physiotherapy services, child health services, maternity health services, nursing homes and old peoples homes, prison health services and health services for asylum seekers.

The Regular General Practitioner (RGP) Scheme is a public scheme for organizing services by doctors in general practice that came into force from 1 June 2001. Regular doctors in general practice (RPG) are usually private practitioners with a contract with the municipality. Many doctors work in group practices with 2-5 doctors.

All inhabitants have the right to be on a doctor in general practice's list. Ninety-nine per cent of the population are on a list and the majority of people live within 20 km from the practice site. The coverage with doctors in general practice is good, with 1 329 inhabitants

öppna vården ges av privatpraktiserande specialister eller vid sjukhusen.

Många privata specialistläkare arbetar också deltid vid sjukhusen. Ingen remiss behövs för behandling av specialist i öppen vård och därför fungerar allmänläkarna inte som “gatekeepers” i det isländska sjukvårdssystemet.

**NORGE:** Kommunernas hälso- och sjukvård omfattar, enligt lagen från 1982, offentligt organiserad sjukvård som inte hör under stat eller landstingskommun eller privat hälsoverksamhet som drivs enligt avtalet med kommunen.

Kommunen ska stå för allmänläkare, jourtjänst, sjukgymnastik, sjuksköterskor/ distriktssköterskor, barnmorskor, sjukhem och ålderdomshem, fängelsevård, asylvård.

Fastlegeordningen är en offentlig organisation av allmänläkarverksamheten som trädde i kraft 1 juni 2001. Fastlegen är oftast privata med avtal med kommunerna. Många fastleger har grupp-mottagningar på 2-5 läkare.

Alla invånare har rätt att vara listade, med en listningsgrad på ca 99 % där majoriteten har sin bostad inom 20 km avstånd från mottagningen. Läkartäckningen är god, med 1329 invånare per kurativt läkarårsverk år 2004. Varje fastlege har den 30 september 2005 i

## OUT -PATIENT CARE – with focus on primary health care

per doctor in general practice man-year in 2004. Per 30 September 2005, each regular doctor in general practice had on average 1 200 patients on his or her list.

Regular services by doctors in general practice are not integrated with other municipal health services and in most places doctors in general practice organize their own practice. In some municipalities, particularly in thinly populated areas, regular doctors in general practice are located in nursing homes and/or health centres.

It has become more difficult to staff out-of-hours services, which are regulated according to a separate contract. Regular doctors in general practice are often regarded as being too isolated from other municipal health services. A particular problem has been flow of information between patients and home nursing services/nursing homes and regular doctors in general practice, and the services have become more curative.

Financing of regular doctors in general practice is based on a three-part system, with user fees from patients, fixed remuneration from the municipality, and reimbursements from the National Insurance Administration. The income of regular doctors in general practice is also used to pay other personnel, such as medical secretaries and nurses. A few doctors in general practice work outside the RGP Scheme.

genomsnitt 1200 invånare på sin lista.

Fastlegenes verksamhet är inte integrerat i den övriga kommunhälsotjänsten och fungerar på de flesta ställen genom att läkarna organiserar sin egen praxis. I några kommuner, speciellt i glesbygd, är fastlegen samlokaliserade med sjukhem och/eller hälsocentral.

Det har blivit vanskeligare att bemanna jourtjänsten, som regleras i ett eget avtal. Fastlegen omfattas ofta som för isolerade från den övriga kommunhälsotjänsten. Särskilt problematiskt har det blivit med informationsflödet mellan patienter och hemsjukvård/sjukhem och fastleger och verksamheten har blivit mera kurativt inriktad.

Finansieringen av fastlegene baseras på ett tredelat system med egenbetalning från patienten, fast ersättning för kommunen samt refundering för behandling från Rikstrygdeverket. Fastlegens intäkter används också för avlöning av assisterande personal som läkarsekreterare och eventuell sjuksköterska. Ett fåtal allmänläkare praktiserar utanför fastlegeordningen.

Residents in nursing homes are treated by doctors in general practice who have a contract with the municipality to provide these services, independent of which regular doctors in general practice's list the resident is on. Elderly people, people with functional disabilities, and people who require care and live in their own home or in sheltered accommodation, use regular doctors in general practice and pay a user fee, in contrast to residents in nursing homes.

Health centres provide maternal health services, child health services and school health services, partly by sending out appointments for regular controls, and partly by offering services that people can seek themselves as needed. These health services are provided by health visitors, who are nurses with specialized education. Preventive measures are given high priority, and physicians contribute to the service. Patients are referred to their regular doctor in general practice for treatment.

Prison health services include both services by doctors in general practice and nursing services. Prisoners are referred to specialized health services if needed.

Health services for asylum seekers include routine screening in addition to normal consultations. When refugees have accommodation outside the reception centre, they are registered with a regular doctor in general practice.

Out-of-hours services for general medicine is the municipalities' system for ensuring that people obtain emergency treatment outside normal working hours.

Boende i sjukhem behandlas av läkare som har avtal om att utföra dessa tjänster för kommunen, oavhängigt av vilken fastlege den boende är lista hos. Äldre, funktionshindrade och omsorgsbehövande som bor hemma eller i stödboende använder fastlegen och betalar egenandel, i motsatt till sjukhemspatienter.

Hälsostationstjänsten för gravida, mödrar, barn och unga och skolhälsovård fungerar dels som regelmässiga kontroller efter kallelse, dels som tjänster man uppsöker vid behov. Dessa tjänster är uppbyggda kring distriktssköterskan (helsesøster), som är en specialutbildad sjuksköterska. Förebyggande arbete betonas starkt, och läkaren medverkar i tjänsten. När medicinsk behandling är nödvändig hänvisas till fastlegen.

Fängelsehälsovård består av både allmänläkar- och sjukskötersketjänster. Vid behov hänvisas till specialissjukvård.

I asylvård görs rutinmässig screeningverksamhet utöver vanliga konsultationer. När bosättning utanför asylförläggningen ordnas listas flyktingarna hos fastlege.

Allmänmedicinens jourverksamhet är kommunens system för att säkra teillgången till omedelbar läkarhjälp, även utanför kontorstid.

## OUT -PATIENT CARE – with focus on primary health care

The state has overall responsibility for specialized health services, according to the Specialized Health Services Act, but these services are provided by the regional health authorities.

Specialized health services are provided in five health regions by five regional health authorities (RHF), under the Ministry of Health and Care Services. RHF's are divided into health trusts, with some large and some smaller hospitals.

All patients who do not require emergency treatment need a referral from a doctor in general practice.

Specialized health services for non-admitted patients are organized as somatic or psychiatric (district psychiatric centres – DPS) out-patient clinics. These services are provided by health trusts, or by health institutions with a contract with a health trust (1 149 contracted man-years in 2004), or by private institutions (a small number).

**SWEDEN:** Health services in Sweden are run by eighteen county councils and three large regions, which have responsibility for both primary health services, county health services and regional health services (with university hospitals). The most important act is the Health Services Act, in which the tasks of the primary health services are described, but in fairly broad terms.

Primary health services are usually provided in health centres with services by doctors in general practice, nursing/district nursing services, child health services and maternal health services. There are few solo practices.

Staten har det grundläggande ansvaret för specialistvården enligt Lagen om specialistvård, men sköts praktiskt av de regionala hälsoföretagen.

Specialistvården sker i fem regioner och sköts av fem regionala hälsoföretag (RHF), ägd av Helse- og omsorgsdepartementet. RHF är indelade i hälsoföretag, med två-tre sjukhus.

Alla patienter som inte behöver omedelbar vård måste ha remiss (henvi-sning) från allmänläkaren.

Den öppna specialistvården organiseras som polikliniker somatisk eller psykiat-riska (distriktspsykiatriske senter – DPS) inom hälsoföretagen eller utanför hälsoföretagen med offentligt avtal (1 149 avtalade årsarbeten år 2004) eller på privat basis (ett fåtal).

**SVERIGE:** Hälso- och sjukvården i Sverige drivs av 18 landsting och tre större regioner, som ansvarar för både primärvård, länssjukvård och regionsjukvård (vid universitetssjukshuset). Den viktigaste lagen är Hälso- och sjukvårdslagen (HSL), där primärvårdens uppdrag beskrivs, men tämligen vitt formulerat.

Primärvården bedrivs vanligtvis vid vårdcentraler med allmänläkare, sjuksköterskor/ distriktssköterskor, barn- och mödravårdscentral. Endast ett mindre antal enläkarmottagningar finns.

Out-of-hours services are provided by joint duty centres, most often located at one of the health centres, or sometimes based in a hospital's emergency department.

Since 1994, the county councils have had responsibility for organizing primary health services so that all inhabitants who wish to do so can choose a regular doctor in general practice. The legislation was made more specific in 1999, such that the choice of a doctor in general practice is not limited to a specific geographical area in the county. Despite this, in 2005, only 40 per cent of the population had a regular doctor in general practice.

Health centres are financed through grants, but several county councils have plans to introduce a system based on capitation. Nowadays, a quarter of health centres are privately run. Health centres with nurses include district nursing services and nursing services (consultations) for patients with asthma, diabetes and hypertension. Gynaecological examinations, check-ups and family planning counselling, that are not a part of services for pregnant women or services for adolescents, are also provided in these health centres.

Under maternal health services, statistics are recorded for consultations and home visits that are part of maternal health services. The following services are included: gynaecological examinations, mammography, antenatal check-ups, prenatal and postnatal check-ups, and prevention counselling in connection with pregnancy. Basic maternal health services and child health services that are provided in hospitals are also reported here.

Jourverksamhet bedrivs vid gemensamma jourcentraler, oftast vid någon vårdcentral eller ibland samlokaliserade med sjukhusens akutmottagningar.

Landstingen är sedan 1994 skyldiga att organisera primärvården så att alla invånare som så önskar kan välja en fast läkarkontakt. Lagstiftningen precisades år 1999 så att den enskildes val inte får begränsas till ett visst geografiskt område inom landstinget. Trots detta är det 2005 fortfarande enbart 40 procent som har en fast läkare.

Vårdcentralerna har anslagsfinansiering, men flera landsting har eller planerar att införa system som bygger på kapitering. Av vårdcentralerna drivs numera en fjärdedel i privat regi. Sjuksköterskemottagning omfattar såväl distriktssköterskemottagning som specialmottagning för till exempel astma-, diabetes- och hypertoni-patienter. Gynekologiska undersökningar och hälsokontroller samt preventivmedelsrådgivning, som varken sker i anslutning till graviditet eller inom ungdomsmottagningsverksamhet, ingår också här.

Under mödrahälsovård redovisas mottagningsverksamhet och hembesök som sker inom ramen för mödrahälsovård. Här ingår gynekologiska undersökningar, mammografier och hälsokontroller av gravida kvinnor, för- och eftervård, samt preventivmedelsrådgivning i anslutning till graviditet. Även basal mödrahälsovård och barnhälsovård som bedrivs på sjukhus redovisas också här.

## OUT -PATIENT CARE – with focus on primary health care

Home nursing services are provided both in people's homes and in sheltered accommodation. The county councils always have a responsibility to provide physicians for the home nursing services, both for people in their own homes and those who live in sheltered accommodation. The municipalities always have responsibility for employees up to the level of physician for health services for people in sheltered accommodation.

In-patient services in primary health care (with beds for observation and for non-complicated cases) is in the statistics reported as "in-patient primary health care". In only six counties, mainly those with low density populated areas, some in-patient services are provided within the primary health services.

As other primary health services, statistics on the following services are recorded: consultations with young people for advice on prevention, school health services, occupational health services, chiropody services, patient information/health education for individual patients/patient groups.

There are two ways in which private health service providers can provide health services with public funding: according to a health service contract or according to the national tariff. A health service contract means that the county council sign a contract with a private health service provider to provide health services with public funding. Apart from health service contracts, it is possible for private doctors and physiotherapists to provide services with public reimbursements, according to national regulations in the Act relat-

Hemsjukvård förekommer i ordinärt och särskilt boende. Landstinget har alltid ansvar för läkarinsatser i hemsjukvård, i såväl ordinärt som i särskilt boende. Kommunen har alltid ansvar för sjukvård i särskilt boende upp till läkarnivå.

Som sluten primärvård redovisas observationsplatser där viss allmänvård och lättvård bedrivs. I endast sex landsting, ofta med glesbygd, förekommer sluten vård inom primärvården.

Som övrig primärvård redovisas exempelvis ungdomsmottagning med preventivmedelsrådgivning som sker inom dess ramar, skolhälsovård, företagshälsovård, fotvård, patientinformation/hälsouppllysning till enskilda patienter/patientgrupper.

Det finns två former för privata vårdgivare att bedriva hälso- och sjukvård med offentlig finansiering: vårdavtal eller den nationella taxan. Vårdavtal innebär att landstingen ingår ett avtal med privata vårdgivare. Avtalet innebär att vårdgivaren ska vara verksam med offentlig finansiering. Vid sidan om vårdavtal finns möjligheten för privatpraktiserande läkare och sjukgymnaster att vara verksam med offentlig ersättning genom nationella regler enligt lagen om läkarvårdsersättning och lagen om ersättning för sjukgymnastik.

ing to reimbursement for services by doctors and the Act relating to reimbursement for physiotherapy services.

The county councils can also sign a contract with other private health service suppliers. Examples are psychologists, chiropractors, rehabilitation teams, doctors who provide home visits, health education, local health services and psychiatry services.

Hospitals are run by county councils or the regions, but there are also some private hospitals. Specialized health services for non-admitted patients are provided in hospitals or by private specialists, who provide one quarter of all consultations.

Landstingen kan även teckna vårdavtal med andra privata utförare. Exempel är psykoterapeuter, kiropraktorer, rehabiliteringsteam, hemläkarjour, sjukvårdsrådgivning, närsjukvård samt verksamheter inom psykiatrin.

Sjukhusen drivs av landstingen eller regionerna, men några privata sjukhus finns dock. Den specialiserade öppna vården bedrivs vid mottagningar vid sjukhusen eller av privatpraktiserande specialister, varav dessa numera står för en fjärdedel av besöken.

## Practice sites and doctors in general practice

The size of practice sites (number of doctors in general practice per site) and the number of employed doctors in general practice, in relation to the size of the population, are of great importance for the possibility to maintain the service provision and performance of primary tasks.

The number of employees per practice site varies a great deal between the Nordic countries. Four countries are compared in Figure 1: Denmark, Finland, Iceland and Sweden. Denmark is at the one extreme, with the majority of doctors in general practice working in solo practices. But observe that Danish doctors in general practice with "solo" praxis can work together with shared facilities. Sweden is at the other end of the scale, where it is usual for doctors in general practice to work to-

## Allmänläkarmottagningar och -tjänster

Allmänläkarmottagningarnas storlek (antal läkare per mottagning) och antalet verksamma allmänläkare i förhållande till befolkningens storlek är av stor betydelse för såväl arbetssätt som för om man kan utföra sitt primära uppdrag eller ej.

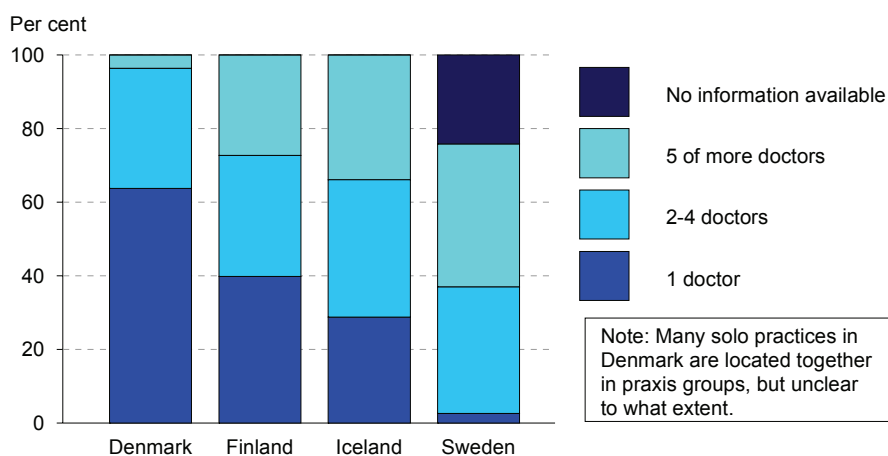
Antal tjänster per allmänläkarmottagning varierar mycket mellan de länderna. I figur 1 jämförs fyra länder– Danmark, Finland, Island och Sverige. Danmark är den ena extremen med majoriteten av allmänläkarna arbetande i "solo"praxis. Observera dock att danska allmänläkare kan ha "solo"praxis men ha en gemensam lokal, dvs. i praktiken fungera som en grupp-mottagning. Sverige utgör exempel på det motsatta, där det vanliga är

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gether in a health centre of varying size. However, data is missing for 250 sites. Some of these are probably solo practices.

att allmänläkarna arbetar tillsammans, vid en vårdcentral av varierande storlek. Dock saknas uppgifter om 250 mottagningar. Troligen är en del av dessa enläkarmottagningar.

**Figure 1 Practice sites, by number of doctors in general practice, per cent.**  
Allmänläkarmottagningar, fördelade på antal allmänläkartjänster, procent.



### Sources:

Denmark: Statistics for 2005. National Board of Health  
Finland: Statistics for 2005. STAKES  
Iceland: Statistics for 2005. The Directorate of Health  
Sweden: Statistics for 2004. National Board of Health and Welfare

### Källor:

Danmark: Uppgifter för 2005. Sundhedsstyrelsen  
Finland: Uppgifter för 2005. Stakes  
Island: Uppgifter för 2005. Medicinaldirektoratet  
Sverige: Uppgifter för 2004. Socialstyrelsen

Table 1 gives an overview of the number of doctors in general practice, the number of inhabitants per doctor in general practice, and the number of inhabitants in the different countries. It is difficult to obtain comparable statistics on the number of doctors in general practice.

I tabell 1 ges en översikt över antalet allmänläkare, antal invånare per allmänläkare samt antal invånare i respektive land. Det är svårt att få fram tillförlitliga uppgifter om antalet allmänläkare.

For the Faroe Islands, Greenland and Åland the figures are for 2003 from the NOMESCO report [5]. The figures for Norway, Iceland and Sweden are national data for 2004, and Denmark and Norway for 2005.

För Färöarna, Grönland och Åland används uppgifter för år 2003 från NOMESCOs rapport [5]. Norge, Island och Sverige har nationella uppgifter för 2004 och Danmark och Norge för 2005.

**Table 1 Number of doctors in general practice**  
Antal allmänläkare

|                                                      | Denmark <sup>1)</sup> | Faroe Islands <sup>2)</sup> | Greenland <sup>3)</sup> | Finland <sup>4)</sup> | Åland <sup>5)</sup> | Iceland <sup>6)</sup> | Norway <sup>7)</sup> | Sweden <sup>8)</sup> |
|------------------------------------------------------|-----------------------|-----------------------------|-------------------------|-----------------------|---------------------|-----------------------|----------------------|----------------------|
| Number of doctors in general practice                | 3 865                 | 27                          | 42                      | 3 720                 | 15                  | 228                   | 4 150                | 4 850                |
| Number of Inhabitants per doctor in general practice | 1 400                 | 1 778                       | 1 357                   | 1 408                 | 1 769               | 1 288                 | 1 103                | 1 858                |
| Number of inhabitants                                | 5 411 405             | 48 000                      | 57 000                  | 5 236 611             | 26 530              | 293 291               | 4 577 457            | 9 011 392            |

1 Denmark: Figures for 2005, National Board of Health

2 Faroe Islands. Health Statistics in the Nordic Countries 2003, NOMESCO 73:5002.

3 Greenland: Health Statistics in the Nordic Countries 2003, NOMESCO 73:5002.

4 Finland: Figures for 2005. STAKES.

5 Åland: Health Statistics in the Nordic Countries 2003, NOMESCO 73:5002.

6 Iceland: Population 1<sup>st</sup> Dec., 2004. The Directorate of Health.

7 Norway: Estimated figures for 2004 based on physician man-years, the National Directorate for Health and Social Affairs.

8 Sweden: Figures for 2004. National Action Plan for Health Services – final report, June 2005

1 Danmark: Uppgifter för 2005, Sundhedsstyrelsen.

2 Färöarna: Helsestatistik för de nordiske lande 2003, NOMESCO 73:5002.

3 Grönland: Helsestatistik för de nordiske lande 2003, NOMESCO 73:5002.

4 Finland: Uppgifter för 2005, STAKES.

5 Åland: Helsestatistik för de nordiske lande 2003, NOMESCO 73:5002.

6 Island: Population 1 dec. 2004, Medicinaldirektoratet.

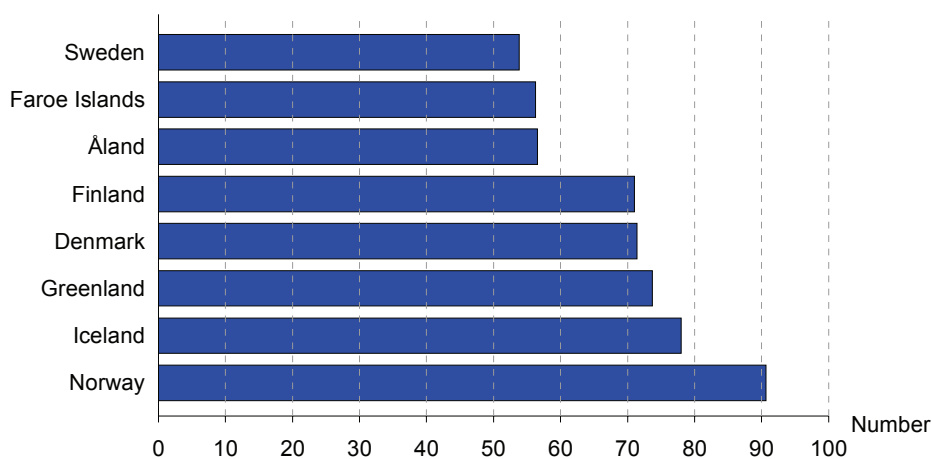
7 Norge: Estimerade uppgifter för 2004 utifrån lege-årsverk, Helsedirektoratet.

8 Sverige: Uppgifter för 2004. Nationell handlingsplan för hälso- och sjukvården – Slutrapport. Socialstyrelsen, juni 2005

Figure 2 compares the number of doctors in general practice per 100 000 inhabitants. This is the measure that is normally used in the NOMESCO reports.

I figur 2 anges istället jämförelsetalet antal allmänläkare per 100 000 invånare. Detta är ett mått som brukar användas i NOMESCOs rapporter.

**Figure 2 Doctors in general practice per 100 000 inhabitants**  
Allmänläkare per 100 000 invånare



## Materials and methods

The attempt was to obtain national data from the Nordic countries on consultations to doctors according to age, gender, diagnosis, preventive services and curative/diagnostic procedures (interventions). This was only partly possible. It was possible to obtain some data on consultations from some of the countries, but most often only from samples of the population. It was not possible to obtain any data at all about treatment procedures. Data on preventive services are available as data related to some of the diagnostic groups, but are often not reported as consultations.

## Material och metod

Man försökte från de nordiska länderna samla in nationellt representativa uppgifter om besök till läkare fördelat på ålder, kön, diagnoser, förebyggande åtgärder och behandlande/ diagnostiska åtgärder (interventioner). Detta blev endast delvis möjligt. Vissa besöksdata har gått att få fram för några länder, men oftast i form av urvalsdata. Uppgifter om behandlande och diagnostiska åtgärder går inte att få fram alls. Förebyggande åtgärder finns som en del i några diagnosgrupper, men redovisas ofta inte som läkarbesök.

More detailed information about the choice of age groups, diagnostic groups and definitions is to be found on NOMESCO's web site. The diagnostic groups that were chosen are based in the groups used in the previous pilot project [3], but with two groups added (asthma and urinary diseases). The aim was that the diagnostic groups should reflect major health problem in primary health services.

The mapping of codes to the diagnostic grouping have been updated for use of ICPC-2 [6] and ICD-10, and for the Swedish version of ICD-10 for primary health services [7]. In addition, mapping have also been done for reporting in ICD-10's respectively ICPC-2's chapter levels. It has been time-consuming and difficult to map the codes. They should therefore be reassessed and developed further. For example, the codes related to gender should be checked, because it appears that some these mappings are incorrect.

Since the possibilities to report data vary in the different countries, the methods must be described separately for each country. Because of considerations of space, detailed descriptions of the size of the samples and missing data are only to be found on NOMESCO's web site. However, it must be said that the results must be interpreted with caution, because of the use of data estimated for the whole country, and because of selective missing data, particularly for diagnoses.

Närmare uppgifter om val av åldersgrupper, diagnosgrupperingar och definitioner finns på NOMESCOs webbplats. Den diagnosgruppering som använts bygger på den indelning som användes i det tidigare pilotprojektet [3], men har utvidgats med två diagnosgrupper (astma och urinvägssjukdomar). Syftet med grupperingen har varit att diagnosgrupperna ska avspegla väsentliga hälsoproblem i primärvården.

Kodnycklarna för diagnosgrupperingen har uppdaterats för användning av ICPC-2 [6] och ICD-10, samt för den svenska primärvårdsversionen av ICD-10 [7]. Dessutom har nycklar konstruerats även för redovisning på ICD-10:s respektive ICPC-2:s kapitelnivåer. Det har varit tidsödande och svårt att konstruera kodnycklar, vilket innebär att de bör granskas och bearbetas ytterligare. Bl.a. måste könsrelaterade koder ses över, då vissa felgrupperingar i mappningen tycks inträffa.

Då möjligheterna att rapportera data varierar för länderna måste metodbeskrivningen göras land för land. Detaljerade uppgifter om urvalsstorlek och bortfall redovisas av utrymmesskäl inte här utan på NOMESCOs webbplats. Dock kan generellt konstateras att nationellt uppräknade uppgifter och selektiva bortfall, speciellt för diagnoser, innebär en betydande osäkerhet som bör beaktas vid tolkningen av resultaten.

**DENMARK:** In Denmark, statistics for primary health services, collected at the national level by the National Board of Health, are individual data. This data can therefore be distributed according to age and gender (data for 2004 are presented here). For non-admitted patients at the hospitals (out-patients), detailed data have been collected in Denmark by the National Board of Health since 1996. The variables for which data are available correspond to the variables for admitted patients (in-patients), and include personal identification number, date of consultation, and detailed information about diagnoses, surgical procedures. However, no data on diagnoses are available in the material.

**FINLAND:** Statistics on consultations in Finland (excluding Åland) have been collected as aggregated data since 1985, without data on gender and diagnosis, but with age groups partly the same as the one used in this report. Since 2001, STAKES have had responsibility for statistics. For specialized health services it has also been possible to distribute the data according to speciality. However, it has not been possible to obtain statistics for the private sector, which include the main part of the occupational health services, or the student health services.

A reform of statistics for non-admitted patients was introduced in 2003. As part of the reform, a pilot project in ten health centres was carried out. In 2003, four of these health centres were able to report data on consultations according to diagnosis, three of them using ICD-10 and one of them using ICPC. Because of the sample of health centres,

**DANMARK:** Statistikuppgifter insamlade till nationell nivå i Sundhedsstyrelsen för primärvården är i Danmark personidentifierbar och kan därför fördelas på ålder och kön (i avsnittet används uppgifter från 2004). För sjukhusväsens ambulanta vård (öppen vård) har man i Danmark insamlat detaljerade uppgifter i Sundhedsstyrelsen sedan 1996. De variabler som det insamlas uppgifter om motsvarar variablerna för inlagda patienter (sluten vård) och omfattar således personnummer, datum för besök, samt detaljerade uppgifter om diagnoser och kirurgiska åtgärder. Däremot finns inga diagnosuppgifter tillgängliga i materialet.

**FINLAND:** Statistikuppgifter om läkarbesök har i Finland (exklusive Åland) sedan 1985 insamlats i aggregerad form, utan uppgift om kön och diagnos men med en snarlik åldersindelning som i denna rapport. Sedan 2001 har Stakes ansvarat för statistiken. Inom specialiserad sjukvård har fördelning kunna ske även på specialitet. Uppgifter från den privata sektorn, där även en stor del av företagshälsovården ingår, och studenthälsovården har dock inte kunnat tas fram.

En statistikreform inom öppenvården inleddes 2003. Inför statistikreformen genomfördes pilotprojekt vid tio hälsovårdscentraler. Av dessa kunde fyra år 2003 redovisa besök fördelade på diagnos, varav tre med användning av ICD-10 och en ICPC. Beroende på urval av hälsovårdscentraler är dessa diagnosuppgifter inte representativa för

the statistics on diagnosis are not representative for the whole country. Since 1998 have information on all out-patient consultations in all public hospitals and some private hospitals been registered in the register of discharged patients (Hilmo).

**ÅLAND:** Statistics on consultations are available for Åland for 2003 and 2004. Data are collected according to the data collection routines that were introduced in 2001. Data are available for all consultations in Åland to doctors in general practice and to other health care personnel. Data are also available for all consultations according to gender and age group. The age groups are: under 1 year, 1–6 years, 7–14 years, 15–49 years, 50–64 years, 65–74 years, 75–84 years and 85 years and over. Statistics according to diagnosis are not available, but statistics are available for both services by doctors in general practice and specialized health services. These data have been recalculated to the age groups used by NOMESCO, but were considered to be too uncertain to be included in the report.

**ICELAND:** The Directorate of Health in Iceland has, for a number of years, collected aggregated information from primary health care centers about the number of consultations, types of contacts and diagnoses.

landet. Sedan 1998 har utskrivningsregistret (Hilmo) samlat in information om alla poliklinikbesök vid samtliga offentliga sjukhus samt några privata sjukhus.

**ÅLAND:** Besöksuppgifter finns för Åland för år 2003 och 2004. Insamlingen följer den datainsamlingsrutin som infördes 2001. Genom datainsamlingen fås uppgifter om antal besök för Åland indelade i läkarbesök och besök till annan personal. För de totala besöken finns uppgifter om kön och åldersgrupp. Åldersgrupperingen var den följande: under 1 år, 1–6 år, 7–14 år, 15–49 år, 50–64 år, 65–74 år, 75–84 år och 85 år och över. Diagnosstatistik finns inte, men uppgifterna finns för såväl allmänläkarvård såväl som för specialiserad vård. Dessa uppgifter omräknades till NOMESCOs åldersindelning, men bedömdes vara för osäkert för att utnyttjas i rapporten.

**ISLAND:** Hälsodirektoratet har i ett antal år insamlat aggregerade besöksuppgifter från hälsocentralerna i form av antal och typ av kontakter samt diagnoser.

## OUT -PATIENT CARE – with focus on primary health care

A minimum dataset for primary health care and for specialists in private practice was issued in 2002 and was tested in 2004. By the year 2005 the data collection was completely effectuated in electronically form and replaced the earlier data collection method with aggregated data. These data are stored in a special database at the Directorate of Health.

The data for 2004 that were provided from 47 of 59 health center have been used in this report. Information about diagnoses have not yet been quality controlled, and are therefore not included. Data about the number of consultations to specialists in private practice was provided by the State Social Security Institute.

**NORWAY:** Statistics for Norway include data on diagnoses coded according to ICPC-2. They are based on all the forms sent to the National Insurance Administration (RTV) to claim reimbursements, for the month of October 2004. Doctors' work related to community medicine in the municipalities is not included, as this is not reimbursed by RTV. This means that consultations associated with school health services, nursing home health services and prison health services are not included. It is also not certain to what extent consultations for out-of-hours services (emergency services) are included in the material. Consultations to doctors in general practice and specialists who do not have a contract with the public services are also not included. It has not been possible to distribute the data according to age and gender.

Ett minidataset för primärvård och privat specialistvård fastställdes år 2002, och prövades år 2004. Först år 2005 är datainsamlingen fullständigt effektuerad i elektronisk form och ersatte den tidigare insamlingsmetoden med aggregerade data. Uppgifterna lagras i en särskild databas vid hälsodirektoratet

Uppgifter erhöles för 2004 från 47 av 59 hälsocentraler, och utnyttjas i denna rapport. Uppgifter om diagnoser har inte kvalitetskontrollerats än, och har därför utelämnats. Uppgifter om besök till privatpraktiserande specialister har erhållits från socialförsäkringsinstitutet. Besöksuppgifter för specialister vid sjukhus finns inte tillgängliga.

**NORGE:** Uppgifterna från Norge innehåller uppgift om diagnoser, kodade med ICPC-2, och grundar sig på samtliga legeregningkort som insändes till Rikstrygdeverket (RTV) under oktober månad 2004. Offentligt läkararbete i kommunerna är inte inräknat, då detta inte betalas av RTV. Det innebär att skolläkarbesök, läkartjänster vid sjukhem och i fängelsevård finns inte medräknat. Det är även oklart i hur stor utsträckning jourverksamhet (legevakt) finns med i materialet eller ej. Allmänläkare och specialister utan avtal finns ej heller med. Materialet har inte kunnat indelas på ålder och kön.

For specialized health services are data for consultations to specialists outside hospitals sent to RTV been used. Data for consultations to hospital specialists are obtained from the Norwegian Patient Register. All data are for the month of October 2004. Since the material is based on data for one month, and data for the total number of consultations is lacking, it is not possible to estimate figures for the whole country

Data on man-years for doctors in general practice are mainly obtained from Statistics Norway's (SSB) database with data reported by the municipalities for 2004, and from SSB's population statistics. SSB has estimated the number of doctor man-years for primary health services for the whole population, using the size of a patient list for one man-year for a doctor with 37.5 working hours a week. RTV estimates only the number of regular doctors in general practice. In contrast to SSB's statistics, doctors with a fixed salary, who are remunerated by the municipality, and who do not have a patient list, are not included. These are doctors who exclusively carry out general medical work and community medicine tasks for the municipality. RTV's statistics also do not provide information about how much each doctor in general practice works.

För specialiserad vård har uppgifter från besök till specialister utanför sjukhusmottagningar som insänds till RTV använts. För besök till specialister vid sjukhusen, har uppgifter hämtats från det norska patientregistret. Samtliga dessa uppgifter är för oktober månad 2004. Då materialet grundar sig på enbart en månad, och uppgift om totalantalet besök saknas, är det inte möjligt att göra någon omräkning till nationell nivå.

Data om allmänläkarnas årsarbete är i huvudsak inhämtat från Statistisk Centralbyrå's (SSB) databas över rapportering från kommun till stat för 2004, samt SSBs befolkningsstatistik. SSB har estimerat antal "legeårsverk" i allmänläkartjänsten i förhållande till befolkningens mängden på basis av värdering av hur stor befolkningslista som utgör ett läkarårsverk med 37,5 timmars arbetsvecka. RTV beräknar enbart antal fastleger. I motsats till SSBs tal omfattas inte fastavlönade kommunala läkare utan befolkningslista, dvs. läkare som enbart utför offentligt allmänmedicinskt och samhällsmedicinskt arbete. RTVs tal beskriver inte heller hur mycket den enskilde allmänläkaren arbetar.

**SWEDEN:** In 2000, Sweden established a system for registration of health service sectors and reporting of health service activities. Since 2002, this registration has been improved. The system is based on aggregated data from the different sectors that are reported annually to the Swedish Association of Local Authorities and Regions (SALAR). It has been possible to use these data to estimate the number of consultations for the whole country for this report.

No national data with personal identification number for consultations with doctors in general practice is collected in Sweden. However, to a much greater extent, the county councils and the regions have now begun to collect data themselves in their own treatment databases. These data are at the individual level, and include data on gender, age and diagnosis. In this report, data on consultations with doctors in general practice (including out-of-hours consultations) in the region of Västra Götaland, which has approximately 1.5 million inhabitants, have been used.

Since 2002, data have been collected in the National Patient Register by the Epidemiology Centre, National Board of Health and Welfare. This data is based on personal identification number, and covers consultations for non-admitted patients with specialists only, that is to say consultations in primary health services are not included. In this report, statistics for 2004 have been used. The register contains, among other things, data on age, gender, diagnosis and surgical procedures.

**SVERIGE:** Sverige genomförde år 2000 en rekommendation om verksamhetsindelning och -redovisning av hälso- och sjukvården. Fr.o.m. 2002 har denna rekommendation följts allt bättre. Systemet bygger på aggregerade verksamhetsindelade data som inrapporteras till Sveriges Kommuner och Landsting (SKL) årligen. I denna rapport har dessa data kunnat användas för uppräknig av läkarbesöken till nationell nivå.

Någon nationell personnummerbaserad insamling av besöksuppgifter från allmänläkarvården görs inte i Sverige, men landstingen och regionerna har i allt högre utsträckning själva börjat samla in data till egna individbaserade s.k. vårddatabaser med uppgifter om kön, ålder och diagnoser. I rapporten har besök till allmänläkare (inklusive jourcentraler) i Västra Götalandsregionen, med drygt 1,5 miljoner invånare, använts.

Det nationella patientregistret vid Epidemiologiskt Centrum, Socialstyrelsen insamlar sedan 2002 även personnummerbaserad information om läkarbesök i öppen vård exklusive primärvård, dvs. i specialistläkarbesök. I rapporten har uppgifter från 2004 använts. Registreret innehåller bl.a. uppgifter om ålder, kön, diagnoser men även kirurgiska åtgärder.

For both consultations with doctors in general practice and specialists there are missing data compared with SALAR's aggregated statistics, and also missing data for diagnosis.

För både allmänläkar- och specialistbesök finns ett bortfall i förhållande till SKL:s aggregerade uppgifter, men även bortfall av diagnosuppgifter.

## Results

Our ambition was to get all the Nordic countries to collect data on consultations according to gender, age, diagnosis, preventive and health promotion services, and diagnostic and curative procedures.

A presentation of the results shows a fragmentary picture. Statistics that are possible to obtain and report in one country are often not possible to obtain in another. Organization, reporting of statistics and classification are far too different in the different countries. However, for several countries, it has been possible to make comparisons, by using available aggregated data, detailed data, and individual data from pilot projects and registers.

Both for consultations with doctors in general practice and specialists, it has only been possible to obtain data for certain years, or only for some parts of the country.

Some data on consultations are available according to age and diagnostic group, and in some cases also according to gender. However, there is little data on preventive and health promotion services, and no information at all about diagnostic and curative procedures.

## Resultat

Ambitionen var att för samtliga nordiska länder samla in uppgifter om läkarbesök fördelat på kön, ålder, diagnos, förebyggande och hälsofrämjande insatser samt diagnostiska och behandlande åtgärder.

När resultatet av dessa ambitioner skall redovisas framträder en fragmentarisk bild. Det som är möjligt att särskilja och redovisa i ett land visar sig inte vara möjligt i ett annat. Organisation, statistisk redovisning och indelningsgrunder skiljer alltför mycket mellan länderna. Dock finns från flera länder statistiska uppgifter på aggregerad och tillräckligt detaljerad nivå som, tillsammans med individbaserade pilotprojekt och individbaserade register, ger möjlighet till en viss jämförelse.

Både när det gäller besök till allmänläkare och till andra specialister gäller såldes att det är endast urval för visst eller vissa år eller urval av vissa delar av landet som är möjliga att erhålla.

Redovisningen av besöken kan ske i ålders- och diagnosgrupper och ibland även kön. Däremot finns enbart vissa uppgifter om hälsofrämjande och förebyggande arbete, och information om diagnostiska och behandlande åtgärder saknas helt.

Absolute figures for samples and estimated figures for the whole country are only presented on NOMESCO's web site. However, some measures are presented in the report, in order to be able to make some comparisons:

- consultations per 1 000 inhabitants
- consultations to doctors in general practice and to specialists
- consultations according to age and diagnoses

A discussion of the reasons for the differences in the statistics is presented in the discussion section. The explanations for the differences according to age, gender and diagnosis, shown in the tables and figures, are often similar.

In the text, between the tables and figures, interesting findings are pointed out and differences are commented on.

## Age distribution

Denmark, Finland and Sweden have been able to report statistics estimated to the national level, according to gender and age, for both consultations to doctors in general practice and to specialists. Iceland has been able to estimate age and gender distributed statistics for consultations to doctors in general practice and for specialist in private practice. But data for consultations to specialists at hospitals for Iceland are lacking.

Table 2 shows the number of consultations in absolute figures, in order to

Resultatredovisningen i absoluta tal för urvalet och uppräknat till nationell nivå sker endast på NOMESCOs webbplats. I rapporten lyfts däremot några för jämförelse intressanta omräknade mått fram:

- besök per 1000 invånare
- besöksfördelning allmänläkare och till specialist
- ålders- och diagnosfördelning

Resonemang kring orsaker till skillnader i statistiken förs i ett sammanhang i diskussionsavsnittet. Skillnader i tabell- och figurmaterial som fördelats på kön, ålder och diagnos visar sig ofta ha gemensamma förklaringar.

Mellan tabellerna och figurerna lyfts istället viktiga uppgifter fram och skillnader kommenteras.

## Åldersfördelade uppgifter

Danmark, Finland och Sverige har kunnat redovisa till nationell nivå uppräknade ålders- och könsfördelade uppgifter om läkarbesök till allmänläkare och specialist. För Island har ålders- och könsfördelade uppgifter för allmänläkarbesök kunnat uppräknas till nationell nivå och besök till privatpraktiserande specialister finns tillgängligt. Däremot saknas uppgifter från specialistbesök vid sjukhusens mottagningar för Island.

I tabell 2 redovisas antalet besök i absoluta tal för att ge en uppfattning om

give an idea of the magnitude of the number of consultations, and also to show the large differences between the countries. However, it must be stressed that it is not possible to decide whether the differences are real, or whether they reflect differences between the countries in the way services are organized and the way statistics are produced. Denmark's 4.4 and Iceland's 4.6 consultations per inhabitant cannot be directly compared with Åland's 2.3 and Sweden's 2.6.

storleksordningarna, men även för att redan med en översiktlig tabell belysa de stora skillnaderna. Dock måste man redan här betona att det inte är möjligt att avgöra vad som är en reell skillnad i besöksantalet och vad som kan bero på nationella olikheter i verksamhetsindelning och statistikföring. Att Danmark har 4,4 besök per invånare kan alltså inte direkt jämföras med Ålands 2,3 och Sveriges 2,6.

**Table 2 Number of consultations in out-patient care, estimated for the whole country, number of inhabitants and number of consultations per inhabitant**

Läkarbesök i öppen vård, uppräknat till nationell nivå, befolkning samt besök per invånare

|                                              | Denmark    | Finland    | Åland  | Iceland   | Sweden     |
|----------------------------------------------|------------|------------|--------|-----------|------------|
| Consultations to doctors in general practice | 19 743 046 | 9 204 384  | 26 805 | 857 738   | 10 634 700 |
| Consultations to specialists                 | 4 206 330  | 6 731 022  | 35 290 | 481 391   | 12 354 000 |
| Total number of consultations                | 23 949 376 | 15 935 406 | 62 095 | 1 339 129 | 22 988 700 |
| Number of inhabitants                        | 5 411 405  | 5 236 611  | 26 530 | 293 291   | 9 011 392  |
| Consultations per inhabitant                 | 4.4        | 3.0        | 2.3    | 4.6       | 2.6        |

Sources: See Tables 3a and 3b

Källor: se Tabell 3a och 3b

Tables 3a and 3b show the number of consultations for non-admitted patients with doctors in general practice and specialists per 1 000 inhabitants according to age group.

I tabell 3a och 3b redovisas allmänläkar- och specialistbesök per 1000 invånare i respektive åldersgrupp.

For consultations with doctors in general practice, the differences between the countries are more pronounced than for all consultations. Denmark and Iceland have, compared to Finland and especially Sweden, higher figures in all ages, but more evident for small children, middle-aged and elderly people.

För allmänläkarbesöken blir skillnaderna mellan länderna i några av åldersgrupperna ännu mer uttalade än i totalmaterialet. Danmark och Island har, jämfört med Finland och särskilt Sverige, högre tal i alla åldrar, men mera uttalat för småbarn, medelålders och äldre.

## OUT -PATIENT CARE – with focus on primary health care

**Table 3a Number of consultations to doctors in general practice, estimated for the whole country, per 1000 inhabitants in age group**

Allmänläkarbesök, uppräknat till nationell nivå, per 1000 invånare i åldersgruppen

|                               | Danmark <sup>1)</sup> | Finland <sup>2)</sup> | Island <sup>3)</sup> | Sverige <sup>4)</sup> |
|-------------------------------|-----------------------|-----------------------|----------------------|-----------------------|
| <1 year                       | 10 988                | 2 111                 | 8 984                | 743                   |
| 1-4 year                      | 2 469                 | 3 356                 | 3 655                | 1 294                 |
| 5-14 year                     | 1 967                 | 1 480                 | 1 610                | 736                   |
| 15-24 year                    | 2 876                 | 1 579                 | 2 291                | 877                   |
| 25-44 year                    | 3 237                 | 1 387                 | 2 376                | 1 036                 |
| 45-64 year                    | 3 700                 | 1 500                 | 3 122                | 1 242                 |
| 65-74 year                    | 5 427                 | 2 465                 | 4 865                | 1 659                 |
| 75-84 year                    | 6 929                 | 2 970                 | 6 013                | 2 090                 |
| 85+                           | 6 954                 | 3 181                 | 5 128                | 1 805                 |
| Total, per 1000 inhabitants   | 3 648                 | 1 758                 | 2 925                | 1 180                 |
| Total number of consultations | 19 743 046            | 9 204 384             | 857 738              | 10 634 700            |
| Number of inhabitants         | 5 411 405             | 5 236 611             | 293 291              | 9 011 392             |

1 Denmark: All consultations to doctors in general practice for 2004. National Board of Health

2 Finland: Consultations to doctors in general practice for 2003 at ten health centres, estimated for the whole country. STAKES

3 Iceland: Consultations to doctors in general practice from 47 of 59 health centres for 2004, estimated for the whole country. Directorate of Health

4 Sweden: Consultations to doctors in general practice for 2004, registered in Västra Götaland Region, estimated for the whole country. Västra Götaland Region

1 Danmark: Samtliga allmänläkarbesök 2004. Sundhedsstyrelsen

2 Finland: Allmänläkarbesök 2003 vid tio vårdcentraler, uppräknat till nationell nivå. Stakes

3 Island: Allmänläkarbesök 2004 från 47 av 59 hälso-centraler, uppräknat till nationell nivå. Medicinaldirektoratet

4 Sverige: Allmänläkarbesök 2004, vårdregistret i Västra Götalands region, uppräknat till nationell nivå. Västra Götalandsregionen

For specialist consultations in Table 3b, the differences are less. However, for both Denmark and Finland the number of specialist consultations is considerably less than shown in Table 3.15 in NOMESCO's report Health Statistics in the Nordic Countries 2003. Note that the consultations to specialists include both specialists at hospital as well as outside hospital (with exception of Iceland!).

För specialistbesöken i tabell 3b är skillnaderna mindre. Dock gäller att för både Danmark och Finland specialistbesöken är avsevärt lägre än de som redovisats i tabell 3:15 i föregående års (2003) hälsostatistiska rapport från NOMESCO. Observera att specialistläkarbesöken omfattar såväl specialistläkare vid sjukhus såväl som utanför (med undantag av Island!).

**Table 3b Number of consultations to specialists, estimated for the whole country, per 1000 inhabitants in age group**

Specialistläkarbesök, uppräknat till nationell nivå, per 1000 invånare i åldersgruppen

|                               | Denmark <sup>1)</sup> | Finland <sup>2)</sup> | Iceland <sup>3)</sup> | Sweden <sup>4)</sup> |
|-------------------------------|-----------------------|-----------------------|-----------------------|----------------------|
| <1 year                       | 1 913                 | 1 449                 | ..                    | 1 996                |
| 1–4 years                     | 755                   | 772                   | ..                    | 1 192                |
| 5–14 years                    | 582                   | 750                   | ..                    | 834                  |
| 15–24 years                   | 482                   | 992                   | ..                    | 870                  |
| 25–44 years                   | 635                   | 1 201                 | ..                    | 1 030                |
| 45–64 years                   | 819                   | 1 464                 | ..                    | 1 452                |
| 65–74 years                   | 1 165                 | 1 869                 | ..                    | 2 315                |
| 75–84 years                   | 1 457                 | 1 988                 | ..                    | 2 891                |
| 85+                           | 1 230                 | 1 486                 | ..                    | 2 226                |
| Total per 1 000 inhabitants   | 777                   | 1 285                 | 1 641                 | 1 371                |
| Total number of consultations | 4 206 330             | 6 731 022             | 481 391               | 12 354 000           |
| Number of inhabitants         | 5 411 405             | 5 236 611             | 293 291               | 9 011 392            |

1 Denmark: All consultations to specialists for 2004. National Board of Health

2 Finland: Consultations to specialists in hospitals and health centres for 2003, estimated for the whole country. STAKES

3 Iceland: Consultations to specialists in private practice for 2004. Data from specialists at hospital is not available. Age distributed information is not available. Directorate of Health

4 Sweden: Consultations to specialists in the patient register 2004, estimated for the whole country. Centre for Epidemiology, National Board of Health and Welfare

1 Danmark: Samtliga specialistläkarbesök 2004. Sundhetsstyrelsen

2 Finland: Läkarbesök till specialistmottagningar vid sjukhus och vårdcentraler 2003, uppräknat till nationell nivå. Stakes

3 Island: Specialistläkarbesök till privatpraktiker 2004. Uppgifter saknas från specialistläkarbesök vid sjukhusen. Åldersfördelade uppgifter saknas. Directorate of Health

4 Sverige: Specialistläkarbesök i patientregistret 2004, uppräknat till nationell nivå. Epidemiologiskt Centrum, Socialstyrelsen

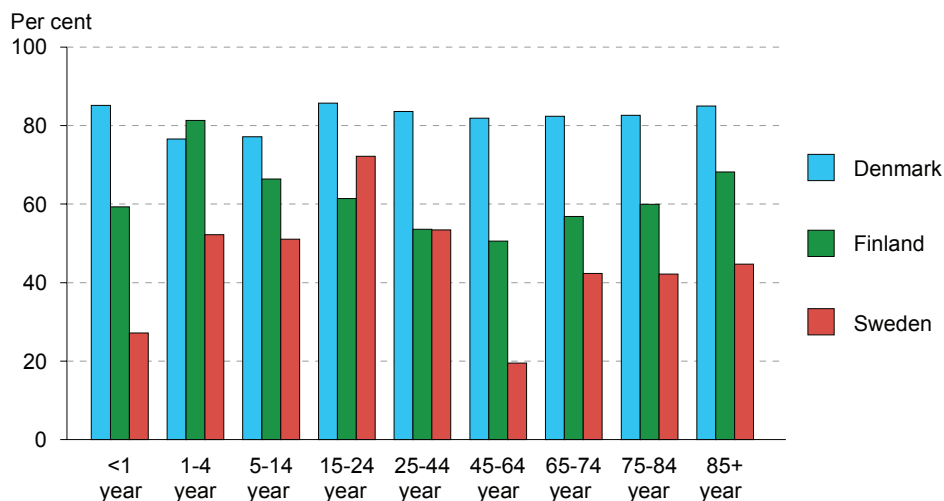
Figure 3 shows consultations to doctors in general practice as a proportion of all consultations. The proportions of consultations to doctors in general practice for Denmark are very similar for the different age groups. The proportions for Finland and Sweden are much more variable for the different age groups. For Sweden, the proportion of consultations to doctors in general practice, is particularly high for 15–24 year-olds.

I figur 3 redovisas andelen allmänläkarbesök av totala antalet besök. Allmänläkarbesöken i Danmark uppvisar en mycket jämn åldersfördelning medan bilden för Finland och Sverige är mera varierande mellan åldersgrupperna. Sverige har en markant andel allmänläkarbesök i åldersgruppen 15–24 år.

## OUT -PATIENT CARE – with focus on primary health care

**Figure 3 Consultations to doctors in general practice, estimated for the whole country, as a percentage of the total number of consultations in age group**

Allmänläkarbesök, uppräknat till nationell nivå, i procent av totala antalet läkarbesök i åldersgruppen



Figures 4a and 4b show consultations with doctors in general practice and specialists according to age group, expressed in percentage of each age group.

The distributions, shown in Figure 4a for consultations to doctors in general practice, are fairly similar for the different countries, but Denmark has a higher proportion of consultations for children under 1 year of age, and Finland has a higher proportion for children 1-14 years of age.

Figur 4a och 4b visar allmänläkarbesök och specialistläkarbesök fördelat på åldersgrupper, men uttryckt i procent av respektive besöksgrupp.

Fördelningen i figur 4a för allmänläkarbesöken är jämnare mellan länderna. Men även har Danmark en mycket större andel besök av barn under 1 år, medan Finland har fler besök i åldern 1-14 år.

**Figure 4a Consultations to doctors in general practice by age group. Per cent**  
Allmänläkarbesök, fördelat på åldersgrupp. Procent

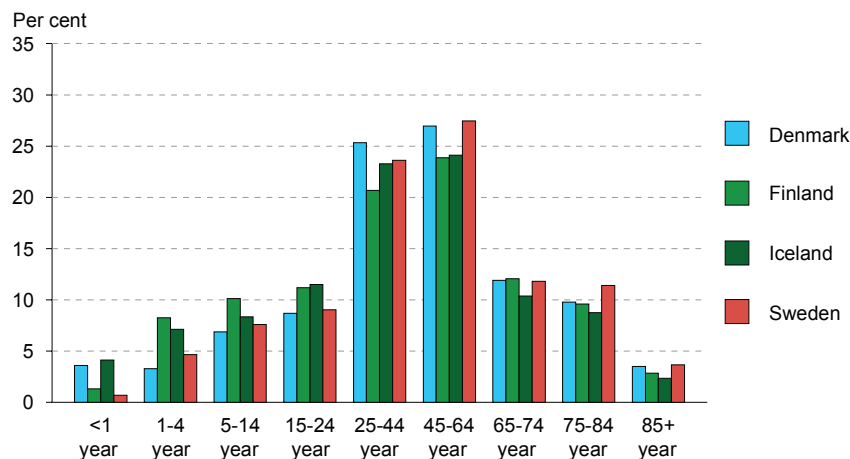
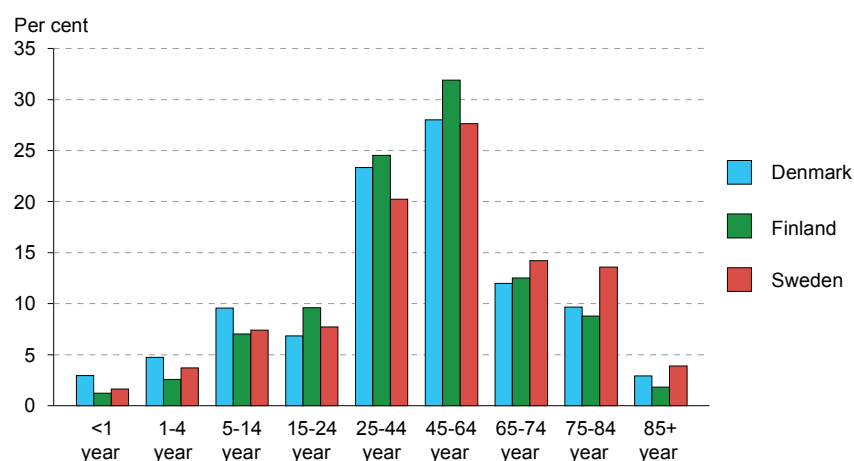


Figure 4b shows that for consultations to specialists, Denmark has a higher proportion of consultations for children aged 0-14. Finland has a higher proportion of consultations for people in working age, while Sweden show higher proportions for people aged 65 and over.

I figur 4b för specialistläkarbesöken ser man att för barn i åldern 0-14 år har Danmark högre andel läkarbesök. Finland däremot har en högre andel besök i arbetsför ålder, medan Sverige har högre andel för åldersgrupperna 65 år och äldre.

**Figure 4b Consultations to specialists by age group. Per cent**  
Specialistläkarbesök, fördelat på åldersgrupp. Procent



## Age and gender distribution

Figures 5a-d show consultations to doctors in general practice and specialists per 1 000 men and women, according to age.

Figures 5a and 5b are based on the figures presented in Table 3a, but distributed according to both age and gender. There are no differences between the countries in relation to gender distribution. Denmark has a large number of consultations for both boys and girls. Figures 5c and 5d are based on the figures in Table 3b, but distributed according to age and gender.

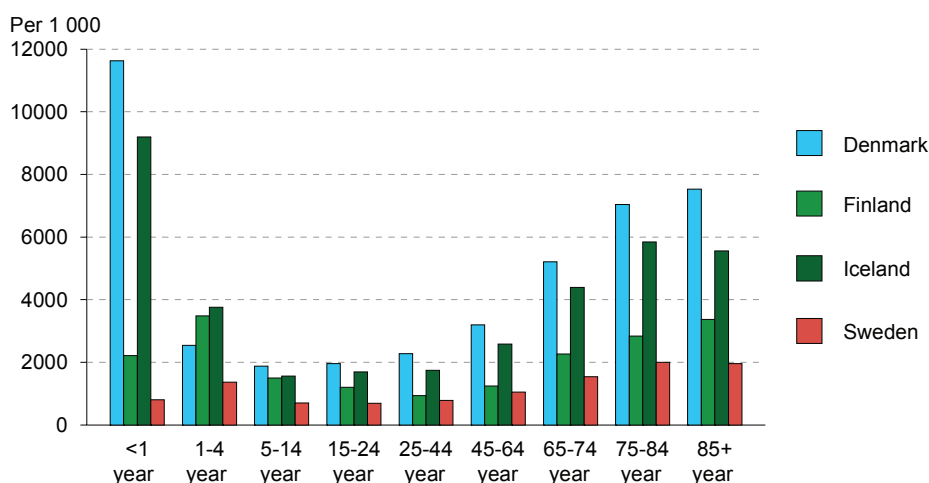
## Ålders- och könsfördelning

I figur 5a-d redovisas könsfördelade läkarbesök till allmänläkare och specialister, per 1000 män och kvinnor i respektive åldersgrupp.

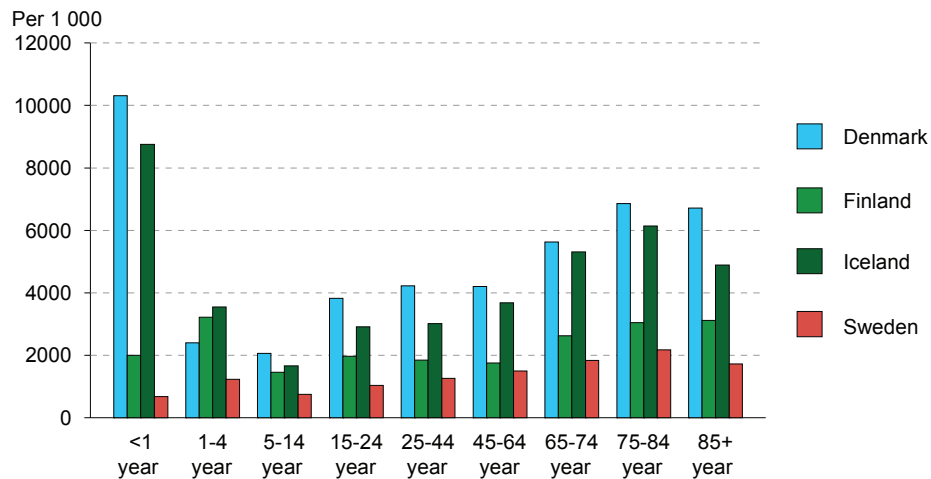
I figur 5a och 5b motsvarar tabell 3a, men fördelad både på ålder och kön. Några skillnader för länderna beroende på kön kan inte ses. Danmark har både för pojkar och flickor höga besökstal. Figur 5c och 5d motsvarar tabell 3b, men fördelat på ålder och kön.

**Figure 5a Number of consultations by men to doctors in general practice, estimated for the whole country, per 1 000 men in age group**

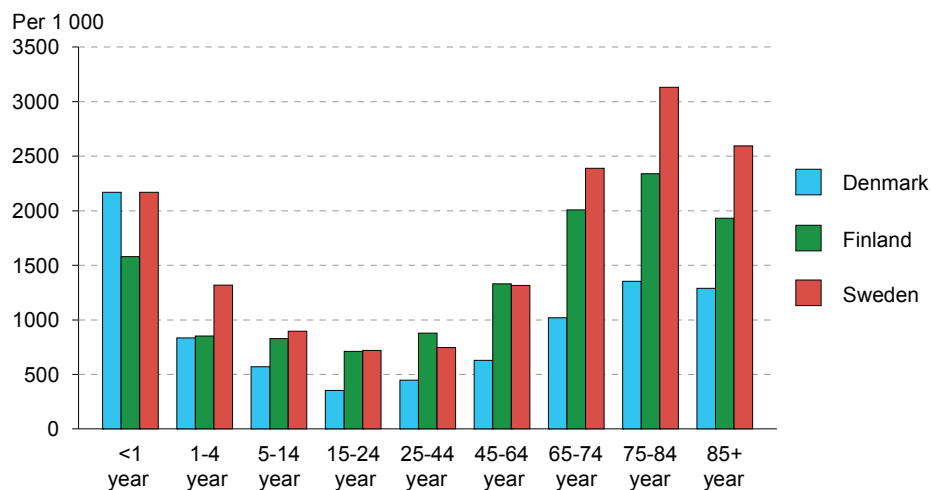
Allmänläkarbesök, uppräknat till nationell nivå, per 1000 män i respektive åldersgrupp



**Figure 5b Number of consultations by women to doctors in general practice, estimated for the whole country, per 1 000 women in age group**  
Allmänläkarbesök, uppräknat till nationell nivå, per 1000 kvinnor i respektive åldersgrupp

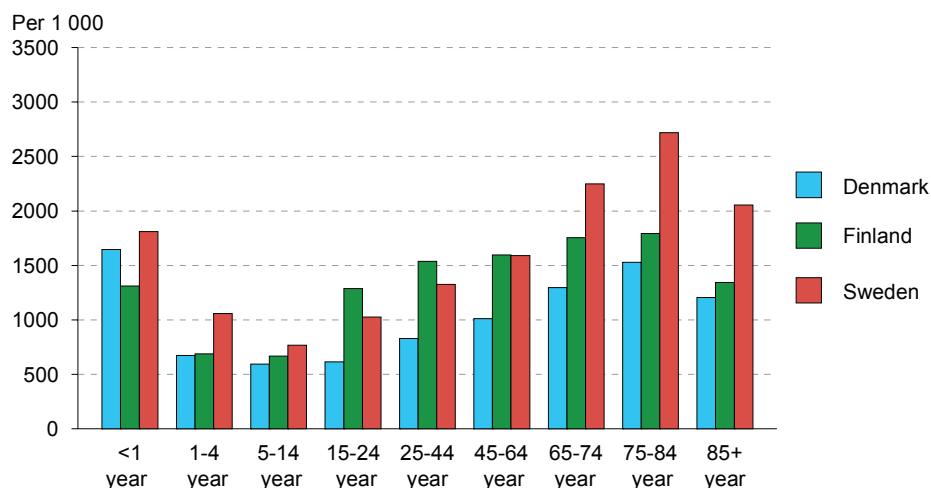


**Figure 5c Number of consultations by men to specialists, estimated for the whole country, per 1 000 men in age group**  
Specialistläkarbesök, uppräknat till nationell nivå, per 1000 män i respektive åldersgrupp



**Figure 5d Number of consultations by women to specialists, estimated for the whole country, per 1 000 women in age group**

Specialistläkarbesök, uppräknat till nationell nivå, per 1000 kvinnor i respektive åldersgrupp



## Distribution according to diagnosis

Figures for consultations according to diagnosis are only available for Finland and Sweden. Norway has statistics according to diagnosis, but does not have national data both for consultations to doctors in general practice and to specialists. Denmark, Åland and Iceland do not have national data for consultations according to diagnosis.

The numbers of consultations per 1 000 inhabitants according to diagnostic group are shown in Table 4, for both doctors in general practice and specialists. Consultations with doctors in general practice for upper respiratory tract infections, neck and shoulder disorders and back disorders are more common in Finland than in Sweden.

## Diagnosfördelade uppgifter

Diagnosfördelade uppgifter på nationell nivå finns endast för Finland och Sverige. Norge har kunnat presentera diagnosfördelad statistik, men saknar möjligheter att räkna upp talen nationellt både för allmänläkar- såväl som för specialistläkarbesöken. Danmark, Åland och Island kan inte på nationell nivå redovisa diagnosfördelad statistik.

Antalet läkarbesök per 1000 invånare per diagnosgrupp beskrivs i tabell 4 för både allmänläkarbesöken och specialistläkarbesöken. I Finland, jämfört med Sverige, är för allmänläkarna infektioner i övre luftvägarna, nack-skulder problem och ryggproblem vanligare. Det är även vanligare i Finland med graviditetskon-

Consultations are also more common in Finland for antenatal check-ups, vaccinations and health check-ups.

Consultations to specialists for psychiatric disorders are more common in Finland, but this may reflect the low frequency in Sweden of recording the diagnosis for non-admitted psychiatric patients. Consultations for accidents and injuries are more common in Sweden. This is also the case for the group "all other diagnoses".

troller, vaccinationer och hälsokontroller.

För specialistbesöken är psykiatriska problem är vanligare i Finland, men detta kan bero på låg frekvens diagnoskodning i Sverige i psykiatrisk öppenvård. Skador är vanligare i Sverige, liksom diagnoser som hamnar i gruppen med "övriga problem".

**Table 4 Number of consultations by diagnostic group, estimated for the whole country, per 1 000 inhabitants**  
Läkarbesök fördelat på diagnosgrupp, uppräknat till nationell nivå, per 1000 invånare

|                                                             | Consultations to doctors<br>in general practice |            | Consultations to<br>specialists |            |
|-------------------------------------------------------------|-------------------------------------------------|------------|---------------------------------|------------|
|                                                             | Finland                                         | Sweden     | Finland                         | Sweden     |
| Respiratory tract infections, inc. otitis                   | 252                                             | 186        | 36                              | 42         |
| Asthma                                                      | 8                                               | 14         | 22                              | 16         |
| Neck, shoulder and other enthesopathies/tendinitis          | 96                                              | 62         | 19                              | 21         |
| Low back disorders                                          | 49                                              | 38         | 24                              | 17         |
| Psychiatric disorders                                       | 44                                              | 89         | 215                             | 60         |
| Atopic and hypersensitivity disorders                       | 19                                              | 27         | 25                              | 20         |
| Hypertension                                                | 47                                              | 60         | 6                               | 7          |
| Ischemic heart disease and arrhythmias                      | 27                                              | 26         | 33                              | 28         |
| Diabetes                                                    | 36                                              | 29         | 23                              | 32         |
| Cancer                                                      | 4                                               | 4          | 113                             | 86         |
| Female genital disorders                                    | 16                                              | 9          | 36                              | 50         |
| Digestive system functional disorders                       | 46                                              | 43         | 38                              | 47         |
| Skin infections                                             | 29                                              | 47         | 6                               | 13         |
| Urinary diseases (excluding cancer and injuries)            | 27                                              | 44         | 28                              | 39         |
| Accidents and Injuries                                      | 70                                              | 65         | 71                              | 114        |
| Pregnancy, family planning                                  | 20                                              | 1          | 61                              | 43         |
| Vaccination, check-ups and other preventive matters         | 29                                              | 15         | 41                              | 47         |
| All other diagnoses                                         | 321                                             | 421        | 488                             | 690        |
| Total                                                       | 1 142                                           | 1 180      | 1 285                           | 1 371      |
| Number of consultations in the sample                       | 438 795                                         | 998 038    | 5 187 372                       | 7 285 063  |
| Number of consultations,<br>estimated for the whole country | 9 204 384                                       | 10 634 700 | 6 731 022                       | 12 354 000 |

## OUT -PATIENT CARE – with focus on primary health care

Figure 6 shows consultations to doctors in general practice as a percentage of the total number of consultations according to diagnostic group. In general, Finland has a higher proportion of consultations to doctors in general practice. The only exceptions are consultations for asthma, psychiatric disorders and “all other diagnoses”.

I figur 6 redovisas procentandelen allmänläkarbesök av det totala antalet läkarbesöken per diagnosgrupp. Generellt har Finland en högre andel allmänläkarbesök. Enda undantaget är astma och psykiatriska problem, samt ”övriga problem”.

**Figure 6 Consultations to doctors in general practice, estimated for the whole country, percentage of total number of consultations in the diagnostic group**

Allmänläkarbesök, uppräknat till nationell nivå, i procent av totala antalet läkarbesök i diagnosgruppen

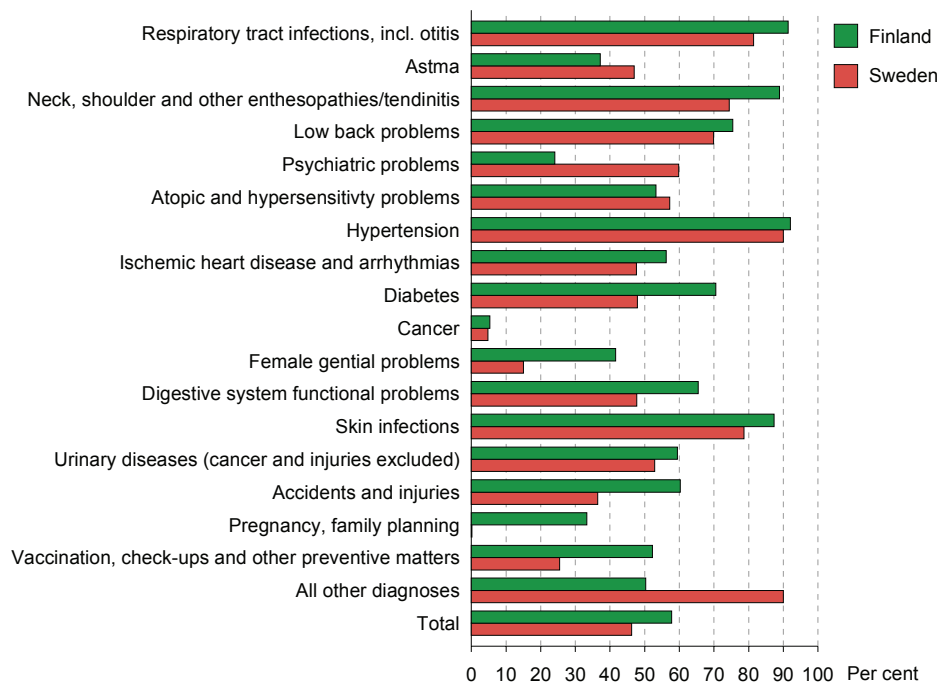


Figure 7a shows consultations to doctors in general practice according to diagnostic group as a percentage of all consultations to doctors in general practice. Figures are also available for Norway, since estimation of national figures is not necessary. Consultations for upper respiratory tract infections are more usual in Finland and Sweden compared to Norway. Consultations for psychiatric disorders are more common in Norway in comparison to Finland and Sweden. But, as stated before, the results must be interpreted with great care. The group “all other diagnoses” accounts for up to one-third of all diagnoses for consultations to doctors in general practice.

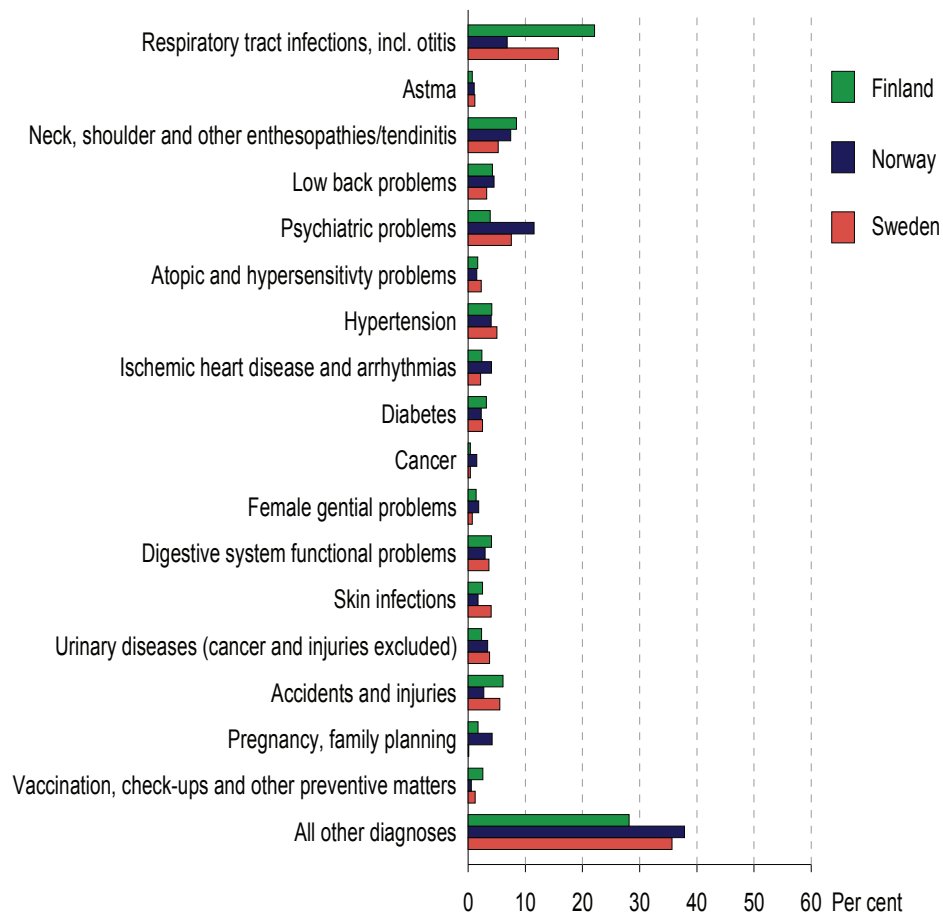
Figure 7b shows consultations to specialists according to diagnostic group as a percentage of all consultations to specialists. Consultations for psychiatric problems are more common in Finland than in Norway and Sweden. Consultations for “all other diagnoses” account for 40 per cent in Finland, 55 per cent in Norway and 50 per cent in Sweden of all consultations to specialists.

I figur 7a redovisas allmänläkarbesöken fördelat på diagnosgrupperna i procent av samtliga allmänläkarbesök. Här kan även Norges resultat inkluderas, då uppräknning inte är nödvändig. I Finland och Sverige är övre luftvägsinfektioner vanligare än i Norge. Psykiatriska problem är vanligare i Norge jämfört med Finland och Sverige. Men, som tidigare konstaterats, resultaten måste tolkas med stor försiktighet. Gruppen ”övriga diagnoser” utgör upp till en tredjedel av allmänläkarbesökens diagnoser.

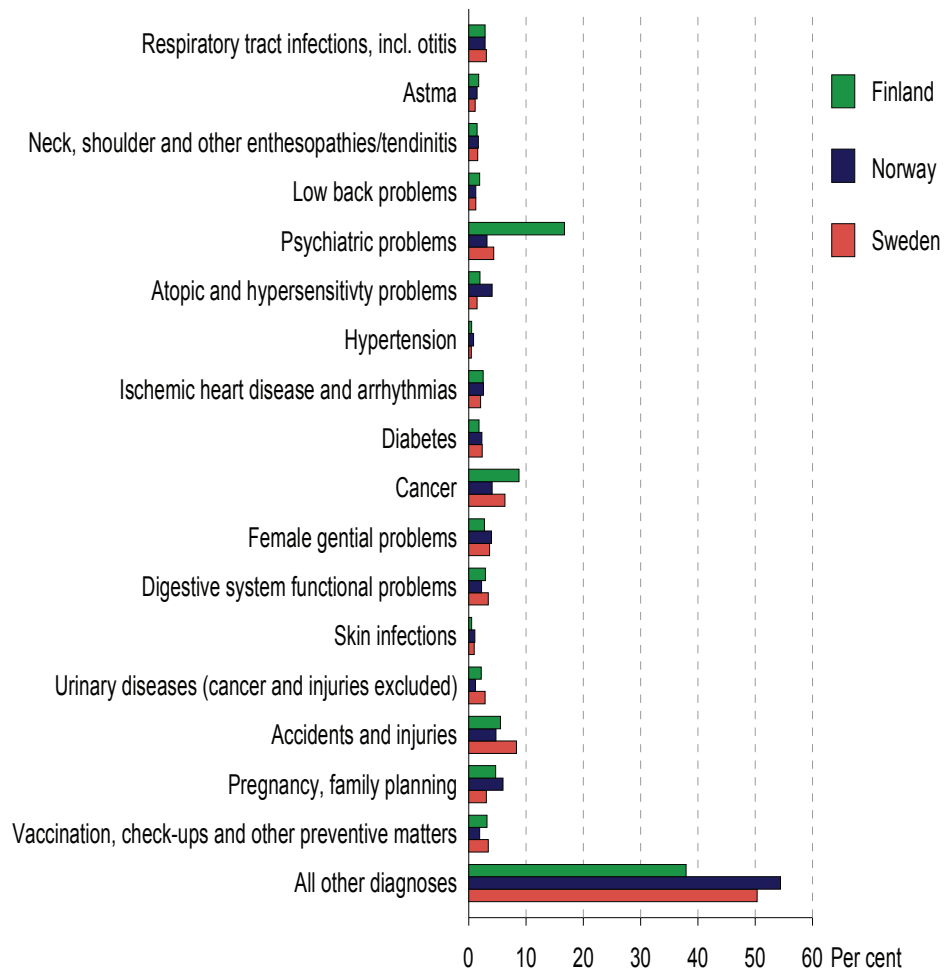
Figur 7b redovisar fördelningen för specialistbesöken. Psykiatriska problem däremot är vanligare i Finland jämfört med Norge och Sverige. Besök för diagnosen cancer är vanligare i Finland. Gruppen ”övriga diagnoser” utgör i Finland kring 40, i Norge 55 och i Sverige 50 procent av specialistbesöken.

OUT -PATIENT CARE – with focus on primary health care

**Figure 7a Consultations to doctors in general practice by diagnostic group. Per cent**  
Allmänläkarbesök, fördelat på diagnosgrupp. Procent



**Figure 7b Consultations to specialists by diagnostic group. Per cent**  
Specialistläkarbesök, fördelat på diagnosgrupp. Procent



## Discussion

The first thing that should be pointed out again is that the results must be interpreted with caution. In most cases the results have been estimated for the whole country from samples. There may be systematic errors due to missing data, since validation of the data has not always been possible. Thus the differences that are seen may reflect methodological problems rather than real differences.

Despite these observations, an important step has been taken with this first attempt by the Nordic countries to develop comparable data for services by doctors in general practice.

In Tables 1-2 and Figure 1, the big differences between the Nordic countries with regard to organization and supply of doctors in general practice are striking. However, it is strange that it is so difficult to obtain reliable data. The official figures that are reported are number of employees. These figures often do not take account of employment situation (employed in services or not), grade of employment (full-time or part-time), and other spare-time occupations. A comparison of Norway and Sweden illustrates this.

Norway report for 2004 an estimated number of regular doctors in general practice (RPG) to 3 765, equivalent to 4 150 man-years. Thus, the number of inhabitants per regular doctor in general practice is 1 216, and the number of inhabitants per man-year is 1 103. Sweden uses three different sources and estimates the number of doctors in general practice

## Diskussion

Det första som återigen bör påpekas är att resultatet måste tolkas med försiktighet. Siffrorna har i de flesta fall uppräknats från urval till nationell nivå och det kan finnas systematiska bortfall i underlaget då valideringsmöjligheter ofta saknas. De skillnader som ses kan således ibland beror på metodproblemen och inte vara uttryck för reella skillnader.

Trots dessa påpekanden är det ett viktigt steg som tagits i och med detta första nordiska nationella försök att redovisa jämförbara data för allmänläkarbesök.

I tabell 1-2 och figur 1 slås man av de stora olikheterna mellan de olika nordiska länderna när det gäller organisation och allmänläkartäthet. Det är dock märkligt att det är så svårt att få fram tillförlitliga uppgifter. De officiella siffror som kan anges är antal tjänster, som ofta inte tar hänsyn till bemanningsläge (tillsatta tjänster eller ej) och tjänstgöringsgrad (heltid, deltid) och andra bisysslor än grundåtagandet. En jämförelse mellan Norge och Sverige är belysande.

Norge redovisar för 2004 och beräknar antalet fastlege till 3 765, som utför 4 150 "legeårsverk". Räknar man på antal invånare per fastlege får man siffran 1 216, och räknar man på "legeårsverk" blir det 1 103. Sverige har osäkra tal och anger tre olika källor. Man uppskattar antalet allmänläkare till mellan 1 754 och 1 858 [8]. Men tar man hän-

to be between 1 754 and 1 858 [8]. But if the grade of employment is taken into account, this is equivalent to 3 900 full-time doctors in general practice, according to the Swedish Union of General Practitioners, which would give a true figure of 2 311 inhabitants per doctor in general practice in Sweden [9]. The aim in the Swedish national plan of action of 6 000 doctors in general practice must thus be regarded as very low, and can in no way correspond to ambitions and results of the Norwegian regular reform for doctors in general practice.

The big differences between the countries shown in Tables 2-4 and Figures 3-5 raise many issues. Some of these issues can be examined when the figures are broken down according to gender, and further according to age and diagnostic group. We have avoided presenting the figures in too much detail, because of the limitations of the data, but in the future detailed comparisons should be possible, and this will provide a more reliable basis for discussions about how health services can be organized appropriately.

It has been important to include all consultations to doctors in general practice and to specialist in out-patient care in the statistics. But consultations to health care personnel other than doctors should also have been included. And including only consultations also limits the possibilities for making comparisons, and for example telephone consultations also need to be considered.

syn till tjänstgöringsgrad motsvarar det endast 3 900 heltidsarbetande allmänläkare enligt Svenska Distriktsläkarförbundet, vilket skulle ge en reell siffra på 2 311 invånare per allmänläkare i Sverige [9]. Målet i den svenska nationella handlingsplanen på 6 000 allmänläkare måste mot denna bakgrund ses som mycket lågt satt och motsvarar inte på något sätt den norska fastlegereformens ambitioner och resultat.

De stora skillnaderna mellan länderna som framgår av tabellerna 2-4 och figurerna 3-5 ger anledning till en mängd frågor. Några av dessa frågor kan belysas väl när man könsfördelar besöken och bryter ner dem ytterligare i ålders- och diagnosgrupper. Vi har avstått från att gå för långt i detaljningsnivå då materialet har brister, men i framtiden borde sådana detaljerade jämförelser bli möjliga och ge ett mera stabilt underlag för diskussionerna kring hur hälso- och sjukvården lämpligtvis skall organiseras.

Att inkludera alla läkarbesök i öppen vård i jämförelsen har varit helt nödvändigt. Men egentligen borde även besök till annan hälso- och sjukvårdspersonal än läkare inkluderas. Avgränsningen till enbart besök är även begränsande för jämförelsemöjligheterna, exempelvis borde man ta hänsyn även till telefonkonsultationer.

## OUT -PATIENT CARE – with focus on primary health care

There are a number of known contributory factors for the differences that are observed, but it is difficult to assess how much of a contribution each factor makes.

Health services are financed by public funds in the Nordic countries, but patients do not pay for consultations doctors in general practice in Denmark, the Faroe Islands and Greenland. In the other countries patients pay a user charge, that varies considerably from country to country. However, there are different arrangements for protecting patients against high costs. Consultations with doctors in general practice for preventive services for children and pregnant women are normally free of charge.

In Denmark, practice sites are easily accessible. Doctors in general practice have responsibility for providing maternity health services, health services for children, and vaccinations. Consultations to nurses are recorded as consultations to a doctor in general practice, because many nurses are employed by doctors. This may partly explain the high figures for consultations.

In Norway and Finland consultations to doctors in general practice related to maternal health services are also included, while they are recorded separately in Sweden. However, pregnant women also have check-ups from midwives in Denmark, Norway and Finland. In Norway, pregnancy tests and ultrasound examinations are carried out by the regular doctors in general practice.

Det finns ett antal kända bidragande orsaker till de skillnader som ses, men hur stor del varje orsak står för är svårbedömt.

De de nordiska länderna finansieras hälso- och sjukvården med offentliga medel, men patienterna betalar ej något för läkarbesök i Danmark, på Färöarna och Grönland. I de övriga nordiska länderna betalar man avgifter, som dock varierar avsevärt från land till land. Dock finns olika former av högkostnadsskydd. Läkarbesök i förebyggande syfte för barn och gravida är dock generellt gratis.

I Danmark har man nära till allmänläkarmottagningen. Barn- och mödrahälsovård, hälsokontroller och vaccinationer ingår i allmänläkarens uppgifter. Sköterskebesök räknas som läkarbesök då sköterskan är anställd hos läkaren. Detta kan tillsammans förklara en del av de höga besökstalen.

Även i Norge och i Finland räknas läkarbesök i mödrahälsovård in i besöksstatistiken, medan den separاتفörs i Sverige. Dock gör även gravida i Danmark, Norge och Finland kontrollbesök hos barnmorska (jordemor), och i Norge graviditeten och görs ultraljud av fastleger.

Sickness certificates are required later in Sweden than in the other Nordic countries. In Denmark, many consultations are for alcohol and drug abusers. In Finland there are diabetes nurses. In Sweden many nurses have consultations, who provide special care for patients with hypertension, diabetes, asthma, and other diseases such as infections, incontinence, leg ulcers etc.

How does the future look for the possibility for having regular national statistics on non-admitted patients in the Nordic countries? The developments are favourable, and perhaps this theme section should have been written some years later.

Denmark has a clear IT plan for health services, for example with standardized patient records. And within the specialized health services for out-patients the possibilities for follow-up will be improved further. However, the development regarding availability of national statistics from doctors in general practice is more uncertain. In Finland, statistics for non-admitted patients from a sample of patients will be available in the next few years, based on a pilot project and the current introduction of electronic patient records. In Iceland, reporting is being introduced both in hospitals and primary health services, based on electronic patient records. In Norway, the development of reporting for the specialized out-patient care is also planned, including reporting of diagnoses to the National Insurance Administration. In Sweden, an attempt is to improve the quality of the patient register for specialized out-patient care, but the situation for the doctors in general practice is more unclear.

Sjukskrivningsintyg krävs senare i Sverige än i övriga nordiska länder. Danmark har många besök av missbrukare. Finland har diabetessköterskor och i Sverige är det vanligt med sköterskemottagningar för hypertoni, diabetes, astma, men även vissa andra sjukdomar som infektioner, inkontinens, bensår m.fl.

Hur ser den framtida möjligheten till regelmässig nationell statistik från den öppna vården ut i Norden? Utvecklingen är gynnsam, och kanske denna temarapport borde skrivits om några år.

Danmark har en tydlig IT-plan för hälso- och sjukvården med bl.a. standardisering av datorjournalerna och inom den specialiserade öppna vården kommer uppföljningsmöjligheterna att förbättras ytterligare. Utvecklingen när det gäller tillgängligheten till nationella uppgifter från allmänläkarna är dock mera osäker. Finland planerar, på basis av sina pilotprojekt och den snabbt pågående datoriseringen av journaler, för en rapportering från ett visst urval av den öppna vården inom de närmaste åren. Island inför rapportering både på sjukhusen och i primärvården utifrån de datoriserade journalerna. I Norge planeras rapporteringen från den specialiserade öppna vården även att utvecklas liksom diagnosrapporteringen till Rikstrygdeverket. Sverige försöker när det gäller den specialiserade öppna vården vidareutveckla kvaliteten i patientregistret, medan några nationella ambitioner f.n. inte finns uttalade för allmänläkarvården.

In summary, there are some positive development with regard to Nordic statistics on health services for out-patient care, but the rules and basis for classification of the data need to be harmonized further. The national individual-based systems need to be more reliable and stable, and need to become a natural part of the national production of statistics, if statistics on health services for out-patient care (non-admitted patients) shall be included routinely in NOMESCO's annual statistical publication.

## Conclusions and recommendations

Based on the work of the working group and this report, the recommendation to the NOMESCO plenary meeting is as follows:

- A continued work with validating and completing the mapping of codes for diagnostic groups and chapter levels for ICD-10 and ICPC-2 is needed
- The group "all other diagnoses" need to be investigated further and the number of diagnostic groups should be increased if necessary
- From next year, at least some of the tables and figures can perhaps be published routinely, if possible with data according to gender, age and diagnosis for consultations for non-admitted patients.

Sammanfattningsvis finns en viss positiv utveckling när det gäller nordisk öppenvårdsstatistik, men regelverken och indelningsgrunderna behöver harmoniseras ytterligare. De nationella individbaserade systemen måste även bli mera tillförlitliga och stabila och bli en naturlig del i den nationella statistikproduktionen om rapportering från den öppna vården rutinmässigt skall ingå i NOMESCOs årliga statistikpublikation.

## Konklusion och förslag

Med bakgrund av arbetsgruppens arbete och rapport i detta temanummer föreslås NOMESCOs plenarmöte följande:

- Ett fortsatt arbete med att validera och färdigställa kodnycklarna för diagnosgrupperingen och kapitelnivåerna för ICD-10 och ICPC-2
- Undersöka gruppen "övrigt" och ta ställning till en eventuell utvidgning av antalet diagnosgrupper
- Rutinmässigt fr.o.m. nästa år rapportera åtminstone några tabeller eller figurer på om möjligt köns-, ålders- och diagnosfördelad besöksstatistik från den öppna vården.

### References

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- (4) Grimsmo A, Hagman E, Falkø, Matthiessen L, Njålsson T. Patients, diagnoses and processes in general practice in the Nordic countries. *Scand J Prim Health Care* 2001;19:76-82.
- (5) Health Statistics in the Nordic Countries 2003. NOMESCO, Copenhagen 2005.
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- (8) Socialstyrelsen. Hälso- och sjukvårdsrapport 2005. Stockholm, 2005. (In Swedish).
- (9) Ledare. *Läkartidningen*, 2006;103:1167. (In Swedish).

## SECTION C

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Appendices  
Bilag

## Appendix 1

### Additional information at [www.nom-nos.dk](http://www.nom-nos.dk)

On NOMESCO's homepage, the following additional information can be found:

- Obstetric definitions
- Hospital definitions
- Overview of medical, surgical and psychiatric specialities that are included in the statistics in this publication
- Short list and statistics on causes of death
- Short list and statistics on discharges from somatic hospitals
- Short list and statistics on surgical procedures

The detailed statistics on the homepage are presented according to gender and 5-year age groups.

In addition, an interactive database is to be found, with the most important data that is available, presented graphically and in maps. The database can be found under the icon *Social and Health Indicators*.

### Supplerende oplysninger på [www.nom-nos.dk](http://www.nom-nos.dk)

På NOMESKO's hjemmeside findes følgende supplerende oplysninger:

- Obstetriske definitioner
- Sygehusdefinitioner
- Oversigt over medicinske, kirurgiske og psykiatriske specialer som indgår i statistikken i denne publikation
- Kortliste samt statistik over dødsårsager
- Kortliste samt statistik over udskrivninger ved somatiske sygehusafdelinger
- Kortliste samt statistik over kirurgiske procedurer

Den detaljerede statistik på hjemmesiden er fordelt på køn og 5-års-aldersgrupper

Desuden findes der en interaktiv database med de vigtigste data hvor det er muligt med såvel grafisk præsentation samt præsentation ved brug af kort. Databasen findes under ikonet *Social and Health Indicators*.

## Further information

### *Yderligere oplysninger*

The following offices responsible for statistics can be contacted for further information concerning the statistics in this publication.

Denne oversigt over statistikansvarlige i de nordiske lande kan bruges til at søge yderligere oplysninger vedrørende statistikken i denne bog.

#### ***Denmark***

Statistics Denmark  
Sejrøgade 11  
DK-2100 Copenhagen Ø  
Phone: +45 39 17 39 17  
Fax: +45 39 17 39 99  
E-mail: [dst@dst.dk](mailto:dst@dst.dk)  
Website: [www2.dst.dk](http://www2.dst.dk)

Have responsibility for:

- Population statistics
- Statistics on alcohol consumption
- Statistics on health care economy
- Statistics on alcohol consumption

National Board of Health  
Islands Brygge 67  
DK-2300 Copenhagen S  
Phone: 72 22 74 00  
Fax: 72 22 74 11  
E-mail: [sst@sst.dk](mailto:sst@sst.dk)  
Website: [www.sst.dk](http://www.sst.dk)

Have responsibility for:

- Statistics on births
- Statistics on abortions
- Statistics on malformations
- Statistics on causes of death
- Statistics on hospital services
- Statistics on health personnel
- Statistics on the use of tobacco

Statens Seruminstitut  
Artillerivej 5  
DK-2300 Copenhagen S  
Phone: +45 32 68 32 68  
Fax: +45 32 68 38 68  
E-mail: [serum@ssi.dk](mailto:serum@ssi.dk)  
Website: [www.serum.dk/dk](http://www.serum.dk/dk)

Have responsibility for:

- Statistics on infectious diseases
- Statistics and information on vaccinations

## FURTHER INFORMATION

Danish Medicines Agency  
Axel Heides Gade 1  
DK-2300 København S  
Phone: +45 44 88 95 95  
Fax: +45 44 88 95 99  
E mail: [dkma@dkma.dk](mailto:dkma@dkma.dk)  
Website: [www.dkma.dk](http://www.dkma.dk)

Have responsibility for:

- Statistics on medicinal products

### *Faroe Islands*

Statistics Faroe Islands  
P.O. Box 2068  
FO-165 Argir  
Phone: +298 35 28 00  
Fax: +298 35 28 01  
E- mail: [hagstova@hagstova.fo](mailto:hagstova@hagstova.fo)  
Website: [www.hagstova.fo](http://www.hagstova.fo)

Have responsibility for:

- Population and vital statistics
- Statistics on health care economy

Chief Medical Officer  
P.O. Box 9  
FO-110 Tórshavn  
Phone: +298 31 18 32  
Fax: +298 31 76 60  
E-mail: [hdj@foe.eli.dk](mailto:hdj@foe.eli.dk)

Have responsibility for:

- Statistics on infectious diseases
- Statistics on forensics
- Statistics on births

Chief Pharmaceutical Officer  
P.O. Box 187  
FR-110 Tórshavn  
Phone: +298 35 01 50  
Fax: +298 35 01 51

Have responsibility for:

- Statistics on medicinal products

National Board of Health in Denmark  
Islands Brygge 67  
P.O. Box 1881  
DK-2300 Copenhagen S  
Phone: 72 22 74 00  
Fax: 72 22 74 11  
E-mail: [sst@sst.dk](mailto:sst@sst.dk)  
Website: [www.sst.dk](http://www.sst.dk)

Have responsibility for:

- Statistics on causes of death

## FURTHER INFORMATION

Ministry of Social and Health Affairs  
Eiragardur 2  
FO-100 Tórshavn  
Phone: +298 30 40 50  
Fax: +298 5 40 48  
E-mail: [ahr@ahr.fo](mailto:ahr@ahr.fo)  
Website: [www.ahs.fo](http://www.ahs.fo)

Have responsibility for:

- Statistics on health personnel
- Statistics on hospital services
- Statistics on abortions
- Statistics and information on vaccinations

### *Greenland*

Statistics Greenland  
P.O. Box 1025  
DK-3900 Nuuk  
Phone: +299 34 50 00  
Fax: +299 32 29 54  
E-mail: [stat@gs.gh.gl](mailto:stat@gs.gh.gl)  
Website: [www.statgreen.gl](http://www.statgreen.gl)

Have responsibility for:

- Population and vital statistics
- Statistics on health personnel
- Statistics on hospital services
- Statistics on health care economy

Chief Medical Officer  
P.O. Box 120  
DK-3900 Nuuk  
Phone: +299 34 5192  
Fax: +299 32 51 30  
E-mail: [eli@gh.gl](mailto:eli@gh.gl)

Have responsibility for:

- Statistics on births
- Statistics on abortions
- Statistics on malformations
- Statistics on infectious diseases
- Statistics and information on vaccinations

National Board of Health in Denmark  
Islands Brygge 67  
P.O. Box 1881  
DK-2300 Copenhagen S  
Phone: 72 22 74 00  
Fax: 72 22 74 11  
E-mail: [sst@sst.dk](mailto:sst@sst.dk)  
Website: [www.sst.dk](http://www.sst.dk)

Have responsibility for:

- Statistics on causes of death

The Central Pharmacy in Copenhagen  
County  
Marielundsvej 25  
DK-2730 Herlev  
Phone: +45 44 57 77 00  
Fax: +45 44 57 77 09

Have responsibility for:

- Statistics on medicinal products

## FURTHER INFORMATION

The Directorate for Health  
P.O. Box 1160  
DK-3900 Nuuk  
Phone: +299 34 50 00  
Fax: +299 32 55 05

Have responsibility for:

- Statistics on hospital services
- Statistics on health care economy
- Statistics on health personnel

### *Finland*

Statistics Finland  
Työpajankatu 13  
FIN-00022 Tilastokeskus  
Phone: +358 9 173 41  
Fax: +358 9 173 42 750  
Website: [www.stat.fi](http://www.stat.fi)

Have responsibility for:

- Population and vital statistics
- Statistics on causes of death
- Statistics on the use of tobacco
- Statistics on road traffic accidents

STAKES (National Research and Development Centre for Welfare and Health)  
P.O. Box 220  
FIN-00531 Helsinki  
Phone: +358 9 396 71  
Fax: +358 9 761 307  
Website: [www.stakes.fi](http://www.stakes.fi)

Have responsibility for:

- Register of Institutional Care
- Medical Birth Register and IVF statistics
- Register of Abortions and Sterilizations
- Statistics on Health Care Personnel
- Statistics on public health care
- Statistics on private health care
- Statistics on labour force in health care
- Statistics on the use of alcohol and drugs
- Statistics on health care expenditure
- Definitions and classifications in health care
- Statistics on primary health care

Finnish National Public Health Institute  
Mannerheimintie 166  
FIN-00300 Helsinki  
Phone: +358 9 474 41  
Fax: +358 9 474 48 408  
Website: [www.ktl.fi](http://www.ktl.fi)

Have responsibility for:

- Register of Infectious Diseases
- Register of Coronary Heart Disease and Stroke
- Statistics and information on vaccinations
- Survey on health behaviour among adults and elderly
- Public Health Report

## FURTHER INFORMATION

National Agency for Medicines  
Mannerheimintie 166  
P.O. Box 55  
FIN-00301 Helsinki  
Phone: +358 9 473 341  
Fax: +358 9 714 469  
Website: [www.nam.fi](http://www.nam.fi)

Have responsibility for:

- Registration of medicinal products and sales licences
- Register on Adverse Drug Reactions
- Statistics on pharmacies

Social Insurance Institution of Finland  
Nordenskiöldinkatu 12  
FIN-00250 Helsinki  
Phone: +358 20 434 11  
Fax: +358 20 434 50 58  
Website: [www.kela.fi](http://www.kela.fi)

Have responsibility for:

- Sickness insurance benefits and allowances, reimbursements for medicine expenses, and disability pensions

Finnish Cancer Registry  
Liisankatu 21B  
FIN-00170 Helsinki  
Phone: +358 9 135 331  
Fax: +358 9 135 1093  
Website: [www.cancer.fi](http://www.cancer.fi)

Have responsibility for:

- Statistics on cancer

Finnish Centre for Pensions  
Fin-00065 Eläketurvakeskus  
Phone: +358 9 107511  
Fax: + 358 9 14 81172  
Website: [www.etk.fi](http://www.etk.fi)

Have responsibility for:

- Pensions due to reduced capacity to work

## *Åland*

The Åland Government  
P.O. Box 1060  
Ax-22111 Mariehamn  
Phone: +358 18 250 00  
Fax: +358 18 191 55

Have responsibility for:

- Statistics on infectious diseases
- Statistics on health personnel
- Statistics on hospital services
- Statistics on health care economy

Social Insurance Institution of Finland  
Statistics Finland  
STAKES  
National Agency for Medicines  
Finnish National Public Health Institute  
Finnish Cancer Registry

See Finland

*Iceland*

Statistics Iceland  
Borgartún 21a  
IS-150 Reykjavík  
Phone: +354 528 1000  
Fax: +354 528 1199  
E-mail: [hagstofa@hagstofa.is](mailto:hagstofa@hagstofa.is)  
Website: [www.statice.is](http://www.statice.is)

Have responsibility for:

- Population and vital statistics
- Statistics on causes of death
- Statistics on alcohol consumption
- Statistics on health care expenditure
- National accounts

Directorate of Health  
Austurströnd 5  
IS-170 Seltjarnarnes  
Phone: +354 510 1900  
Fax: +354 510 1919  
E-mail: [postur@landlaeknir.is](mailto:postur@landlaeknir.is)  
Website: [www.landlaeknir.is](http://www.landlaeknir.is)

Have responsibility for:

- Medical statistics on births
- Statistics on abortions
- Statistics on sterilizations
- Statistics on primary health care
- Statistics on hospital services
- Statistics on infectious diseases
- Statistics on vaccinations
- Statistics on health personnel

Icelandic Ministry of Health and Social  
Security  
Vegmúla 3  
IS-150 Reykjavík  
Phone: +354 545 8700  
Fax: +354 551 9165  
E-mail: [postur@htr.stjr.is](mailto:postur@htr.stjr.is)  
Website: [www.stjr.is](http://www.stjr.is)

Have responsibility for:

- Statistics on pharmaceutical products

Public Health Institute of Iceland  
Laugarvegur 116  
IS-105 Reykjavík  
Phone: +354 5 800 900  
Fax: +354 5 800 901  
E-mail: [lydheilsustod@lydheilsustod.is](mailto:lydheilsustod@lydheilsustod.is)  
Website: [www.lydheilsustod.is](http://www.lydheilsustod.is)

Have responsibility for:

- Statistics on the use of tobacco

Icelandic Cancer Register  
Skógarhlíð 8  
IS-105 Reykjavík  
Phone: +354 540 1900  
Fax: +354 540 1910  
E-mail: [jongl@krabb.is](mailto:jongl@krabb.is); [laufeyt@krabb.is](mailto:laufeyt@krabb.is);  
Website: [www.krabb.is](http://www.krabb.is)

Have responsibility for:

- Statistics on cancer

## FURTHER INFORMATION

### *Norway*

Statistics Norway  
P.O. Box 8131 Dep.  
N-0033 Oslo  
Phone: +47 21 09 00 00  
Fax: +47 21 09 49 73  
E- mail: [ssb@ssb.no](mailto:ssb@ssb.no)  
Website: [www.ssb.no](http://www.ssb.no)

Have responsibility for:

- Population and vital statistics
- Statistics on causes of death
- Statistics on health and social conditions
- Statistics on health and social services
- Statistics on health personnel
- Statistics on hospital services
- Statistics on sterilizations
- Statistics on induced abortions
- Statistics on alcohol consumption
- Statistics on health care economy

Norwegian Institute of Public Health  
P.O. Box 4404 Nydalen  
N-0403 Oslo  
Phone: +47 22 04 22 00  
Fax: +47 23 40 81 46  
E- mail: [folkehelseinstituttet@fhi.no](mailto:folkehelseinstituttet@fhi.no)  
Website: [www.fhi.no](http://www.fhi.no)

Have responsibility for:

- Statistics on sexually transmitted diseases and infectious diseases
- Statistics on tuberculosis
- Statistics on immunization
- Statistics on sale of medicinal products
- Statistics on drugs prescribing

Norwegian Institute of Public Health  
Department of Medical Birth Registry  
Kalfarveien 31  
N-5018 Bergen  
Phone: +47 53 20 40 00  
Fax: +47 53 20 40 01  
E- mail: [mfr@uib.no](mailto:mfr@uib.no)  
Website: [www.uib.no/mfr](http://www.uib.no/mfr)

Have responsibility for:

- Statistics on births and infant deaths

SINTEF Health Research  
Norwegian Patient Register  
Olav Kyrresgate 3  
N-7465 Trondheim  
Phone: +47 40 00 25 90  
Fax: +47 932 70 500  
E- mail: [npr@sintef.no](mailto:npr@sintef.no)  
Website: [www.npr.no](http://www.npr.no)

Have responsibility for:

- Statistics on hospital services

## FURTHER INFORMATION

National Directorate for Health and  
Social Affairs  
P.O.Box. 7000 St Olavs plass  
N-0130 Oslo  
Phone: +47 24 16 30 00  
Fax: +47 24 16 30 01  
E- mail: postmottak@shdir.no  
Website: www.shdir.no

Have responsibility for:

- Statistics on use of tobacco

Cancer Registry of Norway  
Institute of population-based cancer  
research  
Montebello  
N-0310 Oslo  
Phone: +47 22 45 13 00  
Fax: +47 22 45 13 70  
E-mail: kreftregisteret@kreftregisteret.no  
Website: www.kreftregisteret.no

Have responsibility for:

- Statistics on cancer

Ministry of Health and Care Services  
P.O. Box 8011 Dep.  
N-0030 Oslo  
Phone: + 47 22 24 90 90  
E- mail: postmottak@hod.dep.no  
Website: www.hod.no

- Statistics on in vitro fertilization

## *Sweden*

Statistics Sweden  
P.O. Box 24 300  
SE-104 51 Stockholm  
Phone: +46 8 506 940 00  
Fax: +46 8 661 52 61  
E-mail: scb@scb.se  
Website: www.scb.se

Have responsibility for:

- Population and vital statistics
- Statistics on health care economy

National Board of Health and Welfare  
SE-106 30 Stockholm  
Phone: +46 8 55 55 30 00  
Fax: +46 8 55 55 33 27  
E-mail: socialstyrelsen@sos.se  
Website: www.sos.se

Have responsibility for:

- Statistics on births
- Statistics on abortions
- Statistics on sterilizations
- Statistics on in-patients
- Statistics on cancer
- Statistics on causes of deaths

## FURTHER INFORMATION

Swedish Institute for Infectious Disease  
Control  
SE-171 82 Solna  
Phone: +46 8 457 23 00  
Fax: +46 8 32 83 30  
E- mail: [smittskyddsinstitutet@smi.ki.se](mailto:smittskyddsinstitutet@smi.ki.se)  
Website: [www.smittskyddsinstitutet.se](http://www.smittskyddsinstitutet.se)

Have responsibility for:

- Statistics on infectious diseases
- Statistics and information on vaccinations

National Corporation of Swedish  
Pharmacies  
SE-131 88 Stockholm  
Phone: +46 8 466 10 00  
Fax: +46 8 466 15 15  
Website: [www.apoteket.se](http://www.apoteket.se)

Have responsibility for:

- Statistics on drug sales and drug prescribing

Swedish Association of Local Authorities  
and Regions (Swedish Association of Local  
Authorities and Federation of Swedish  
County Councils in co-operation)  
SE-118 82 Stockholm  
Phone: +46 8 452 70 00  
Fax: +46 8 452 70 50  
E- mail: [info@skl.se](mailto:info@skl.se)  
Website: [www.skl.se](http://www.skl.se)

Have responsibility for:

- Statistics on health personnel
- Statistics on hospital capacity
- Statistics on health care economy

## NOMESCO Publications from 1995

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47. Health Statistics in the Nordic Countries 1994. NOMESCO, Copenhagen 1996.
48. NOMESCO Classification of External Causes of Injuries. 3rd revised edition. NOMESCO, Copenhagen 1997.
49. Health Statistics in the Nordic Countries 1995. NOMESCO, Copenhagen 1997.
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53. Health Statistic Indicators for the Barents Region. NOMESCO, Copenhagen 1998.
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56. Health Statistics in the Nordic Countries 1997. NOMESCO, Copenhagen 1999.
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62. Nordic/Baltic Health Statistics 1999. NOMESCO, Copenhagen 2001.
63. NOMESCO Classification of Surgical Procedures, Version 1.6. Copenhagen 2002
64. Health Statistics in the Nordic Countries 2000. NOMESCO, Copenhagen 2002.
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66. Health Statistics in the Nordic Countries 2001. NOMESCO, Copenhagen 2003
67. Sustainable Social and Health Development in the Nordic Countries. Seminar 27th May 2003, Stockholm. NOMESCO, Copenhagen 2003
68. NOMESCO Classification of Surgical Procedures, Version 1.8. Copenhagen 2004
69. Health Statistics in the Nordic Countries 2002. NOMESCO, Copenhagen 2004
70. NOMESCO Classification of Surgical Procedures, Version 1.9:2005. Copenhagen 2004
71. Nordic/Baltic Health Statistics 2002. NOMESCO, Copenhagen 2004.
72. Medicines Consumption in the Nordic Countries 1999-2003. NOMESCO, Copenhagen 2004.
73. Health Statistics in the Nordic Countries 2003. NOMESCO, Copenhagen 2005.
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75. Health Statistics in the Nordic Countries 2004. NOMESCO, Copenhagen 2006.