

2019 Annual Report National Health System

Executive summary



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2019 ANNUAL REPORT NATIONAL HEALTH SYSTEM

EXECUTIVE SUMMARY



Population

HEALTH STATUS



Well-being



Morbidity



Mortality

SOCIAL DETERMINANTS OF HEALTH



Socio-economic determinants



Environmental determinants



Lifestyle

HEALTH SYSTEM



Healthcare



Safety



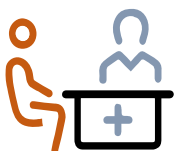
Patients' experience



Accessibility



Pharmaceutical benefits



Use



Physical resources



Human resources



Expenditure

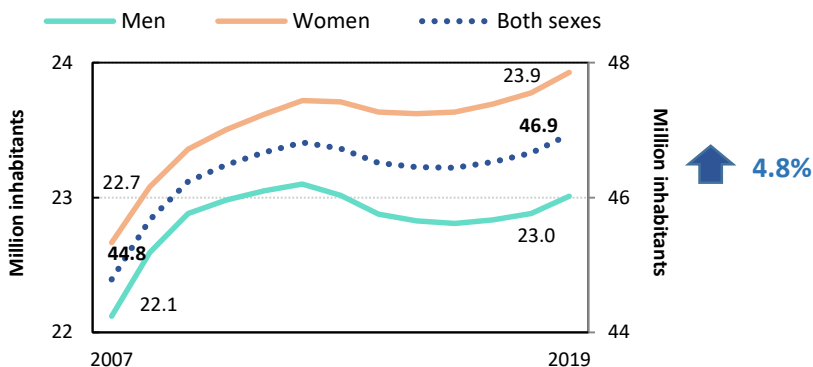


POPULATION

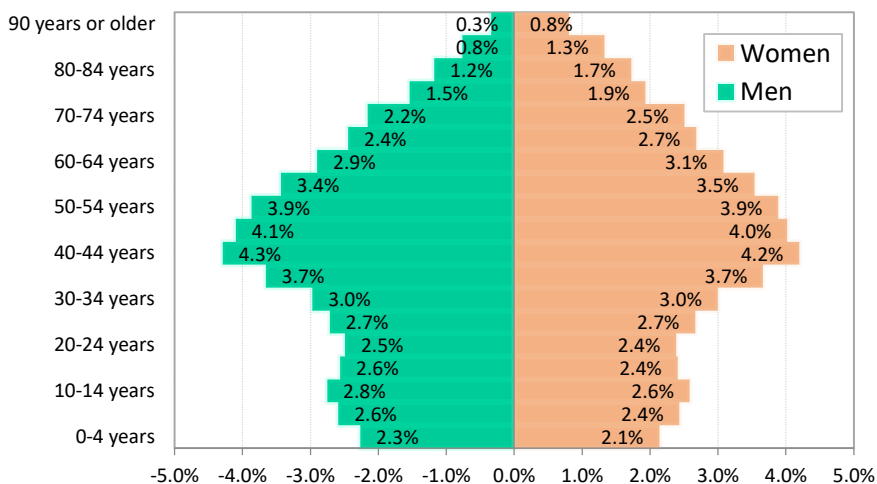
POPULATION FIGURES

46,937,060 people

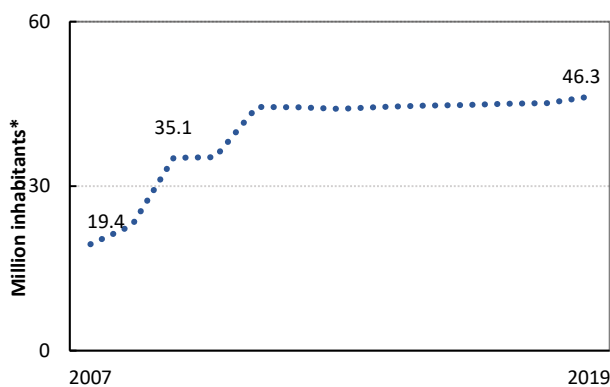
Spain is the **country** with the **5th** largest population of the EU-28 (4th after Brexit)



The population pyramid is clearly **REGRESSIVE**



POPULATION COVERED BY THE NHS



46,281,909 individuals are included in the database of people whose healthcare is covered with public funds; **45,207,196** of them are covered by the **NHS**.

This includes all people whose healthcare is provided by the NHS and those under MUFACE (civil service insurance scheme) receiving private healthcare. Those under ISFAS (armed forces insurance scheme) and MUGEJU (justice administration insurance scheme) are being incorporated into the database.

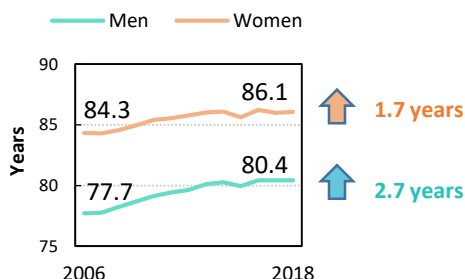
*The chart shows the incorporation of data on the population covered by the NHS into the database.



WELL-BEING

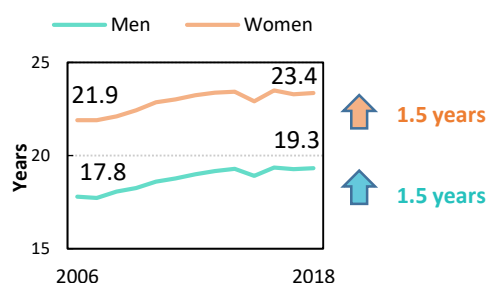
LIFE EXPECTANCY

AT BIRTH

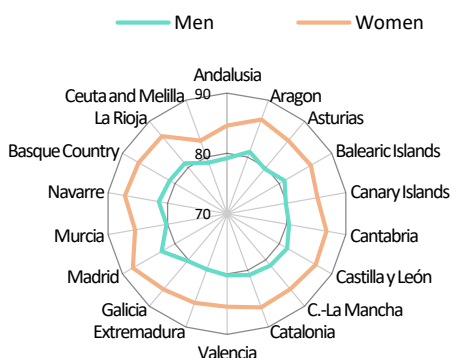


At birth, women's life expectancy is **5.7 years longer** than men's

AT 65



At 65, **WOMEN** are expected to live **23.4 more years** and **MEN, 19.3 more years**

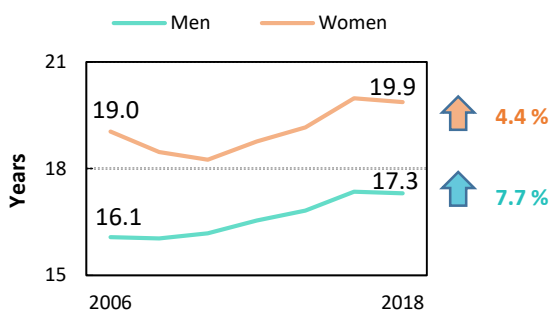


WOMEN'S life expectancy at birth is **86.1 years** and **MEN'S, 80.4 years**

EU-28 LEAB ranking:
1st position for women
3rd for men

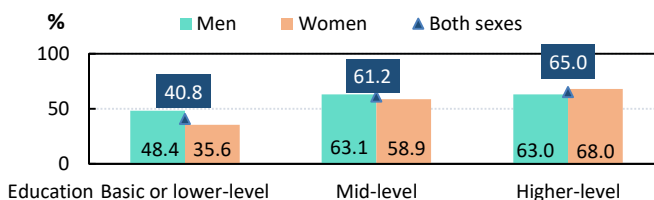
EU-28 LE65 ranking:
2nd position for women
3rd for men

QUALITY OF LIFE IN PEOPLE AGED 65 OR OLDER

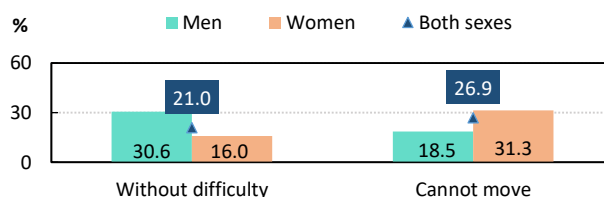


5th position
in EU-28

Since 2006 **HEALTHY LIFE YEARS** at 65 increased by 7.7% for men and 4.4% for women.



A **POSITIVE PERCEPTION OF HEALTH** in people aged 65 or older is clearly lower among people with basic or lower-level education, especially women.



Almost twice as many men as women aged **85 or older CAN MOVE WITHOUT DIFFICULTY.**



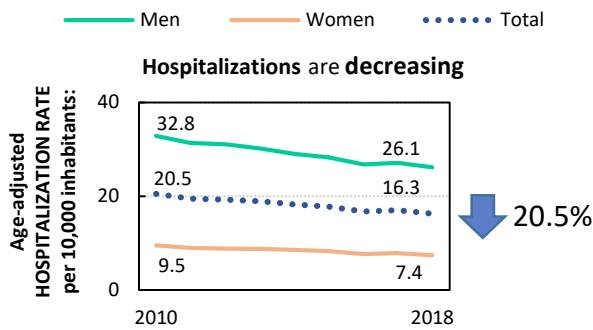
MORBIDITY



CARDIOVASCULAR DISEASE AND RISK FACTORS

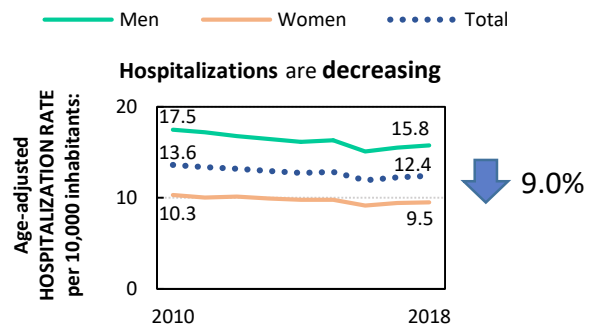
Ischaemic heart disease

3 out of every 100 **MEN** and **1** out of every 100 **WOMEN** suffer from ischaemic heart disease

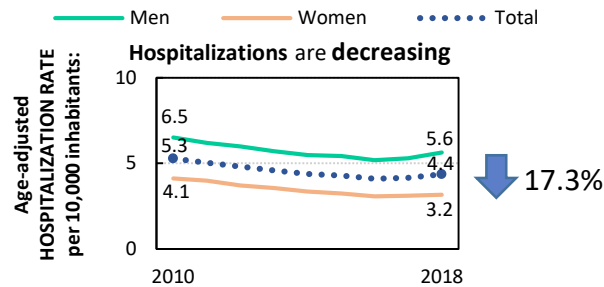


Cerebrovascular disease

The age-adjusted prevalence of cerebrovascular disease is **9.1 cases per 1,000** people, **10.8 for MEN** and **7.7 for WOMEN**



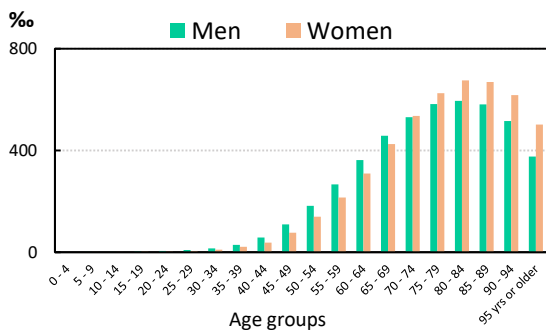
Diabetes mellitus



7 out of **every 100** people suffer from **diabetes**, and **23** out of **every 100** people aged **65** or older.

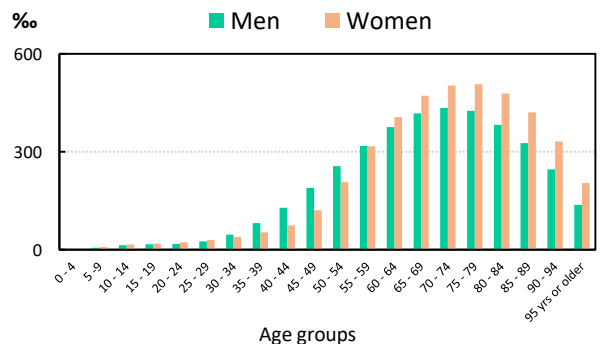
High blood pressure

17% of people suffer from high blood pressure, a condition affecting **more than half** of those **aged 70 or older**



Lipid metabolism disorders

18% of people suffer from a lipid metabolism disorder, and these disorders affect **half** of those **aged 65 or older**





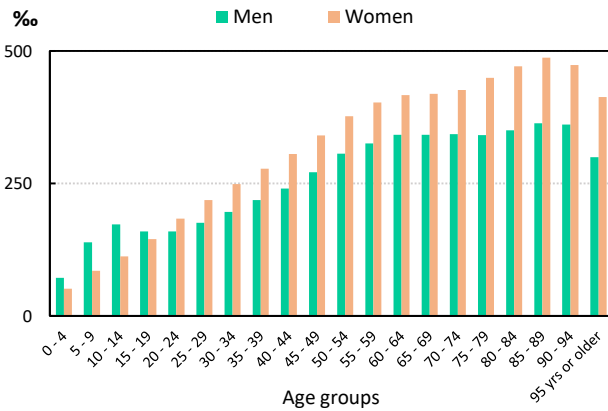
MENTAL DISORDERS



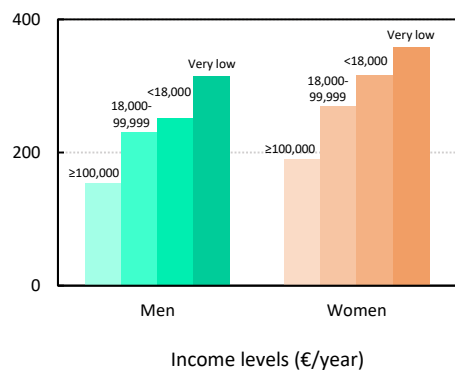
3 out of every **10** people have some **type of mental disorder**.



4 out of every **10** people above the age of **65** have some **type of mental disorder**.



A clear **social gradient** can be observed in **both sexes**



MALIGNANT TUMOURS

2.0% of **men** have malignant neoplasms.

The most frequently occurring neoplasms in **MEN** are

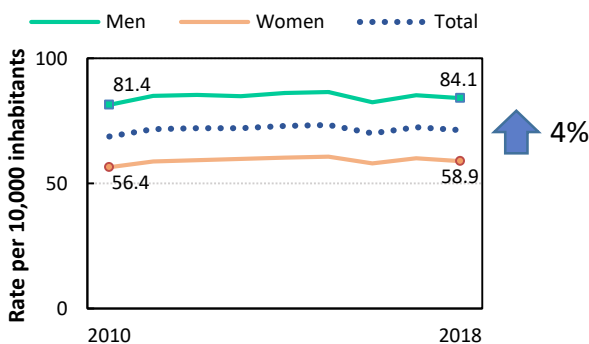
- Skin
- Digestive
- Genital
- Urinary
- Respiratory

1.9% of **women** have malignant neoplasms

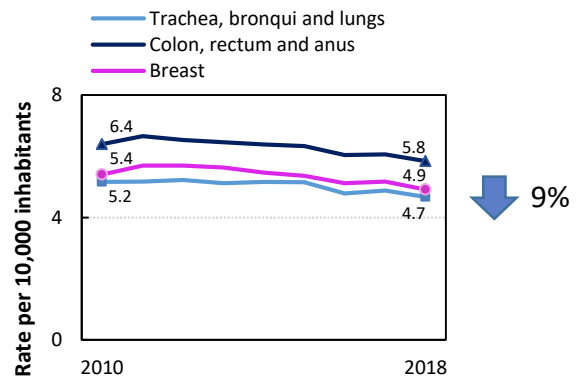
The most frequently occurring neoplasms in **WOMEN** are

- Breast
- Skin
- Digestive
- Genital
- Haematological

Hospitalizations due to malignant tumours have increased



Hospitalizations due to malignant tumours have decreased:





MORTALITY

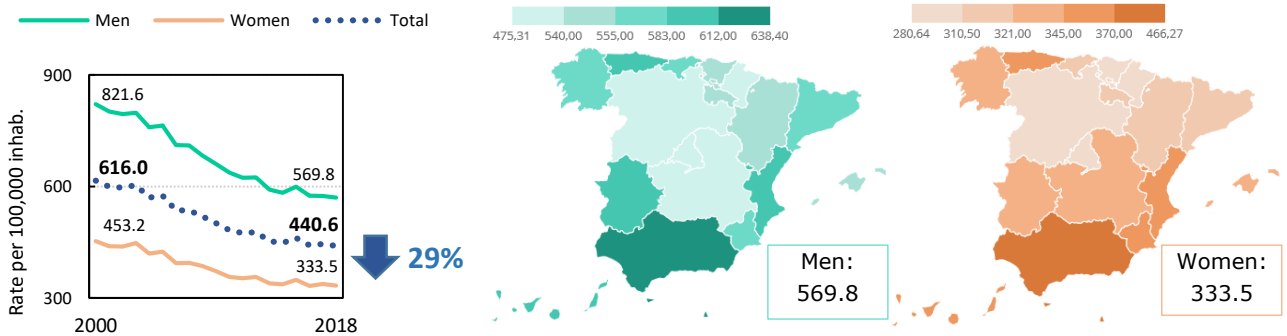
GENERAL MORTALITY

There have been **427,721 DEATHS**:
216,442 in MEN and **211,279 in WOMEN**.

The **GROSS MORTALITY RATE** is **15.3 DEATHS** per 100,000 inhabitants:
944.7 in MEN and **887.1 in WOMEN**.

AGE-ADJUSTED MORTALITY RATE per 100,000 inhabitants

2nd lowest in the EU-28



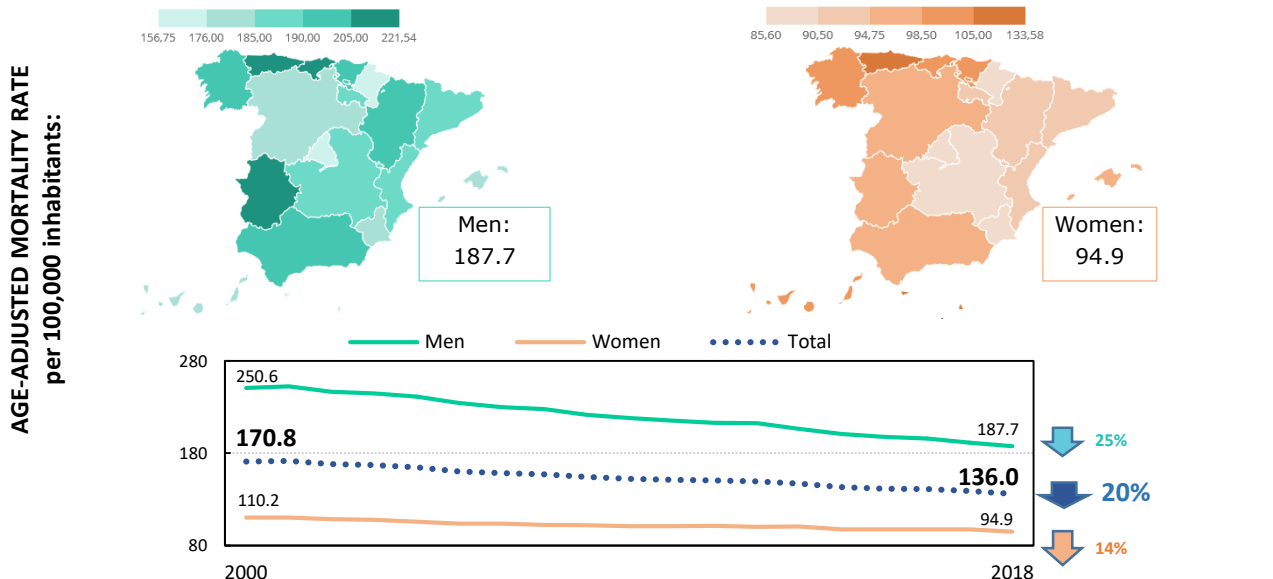
Mortality has decreased by **29%** since 2000.

CARDIOVASCULAR DISEASES and **CANCER** cause **more than 50%** of deaths.

MORTALITY DUE TO MALIGNANT TUMOURS

There have been **108,526 DEATHS**: **66,000 in MEN** and **42,526 in WOMEN**,
 with a **GROSS MORTALITY RATE** of **232.3 DEATHS** per 100,000 inhabitants:
288.1 in MEN and **178.6 in WOMEN**.

5th lowest in the EU-28

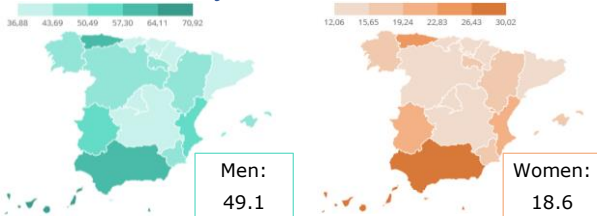


MORTALITY DUE TO CARDIOVASCULAR DISEASE

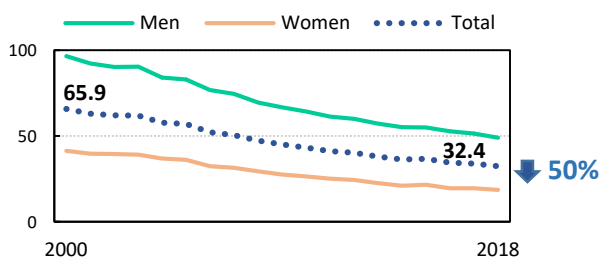
ISCHAEMIC HEART DISEASE

There have been **31,152 DEATHS**:
18,423 in MEN and **12,729 in WOMEN**,
 with a **GROSS MORTALITY RATE** of
66.7 DEATHS per 100,000 inhabitants:
80.4 for MEN and **53.4 for WOMEN**.

3rd lowest in the EU-28



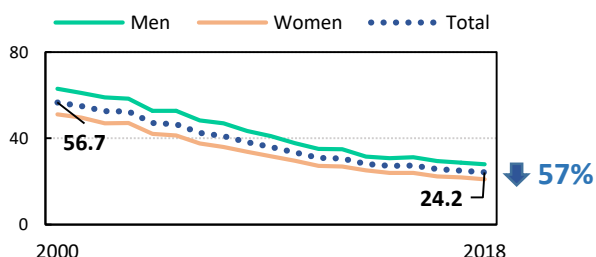
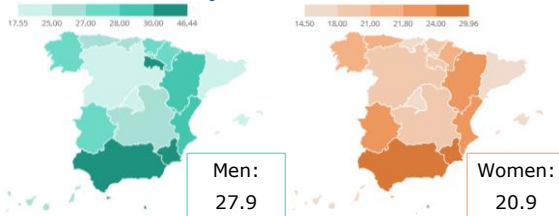
AGE-ADJUSTED MORTALITY RATE per 100,000 inhabitants:



CEREBROVASCULAR DISEASE

There have been **26,420 DEATHS**:
11,435 in MEN and **14,985 in WOMEN**,
 with a **GROSS MORTALITY RATE** of
56.5 DEATHS per 100,000 inhabitants:
49.9 for MEN and **62.9 for WOMEN**.

2nd lowest in the EU-28

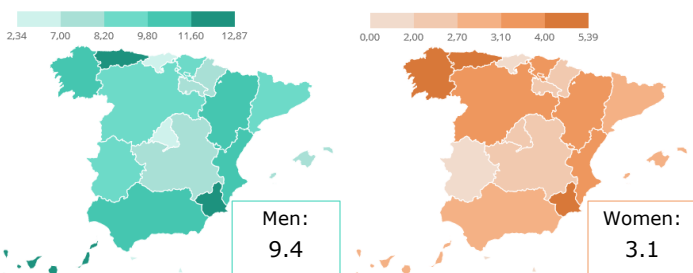


MORTALITY DUE TO SUICIDE

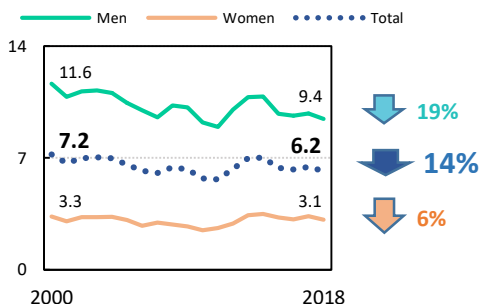
There have been **3,539 DEATHS**:
2,619 in MEN and **920 in WOMEN**,
 with a **GROSS MORTALITY RATE** of
7.6 per 100,000 inhabitants.

4th lowest in the EU

AGE-ADJUSTED RATE per 100,000 inhabitants:



In the past decade, the highest rate occurred in **MEN AGED 75 AND OLDER**, much higher than that for women of the same age, or that for men under the age of 75.

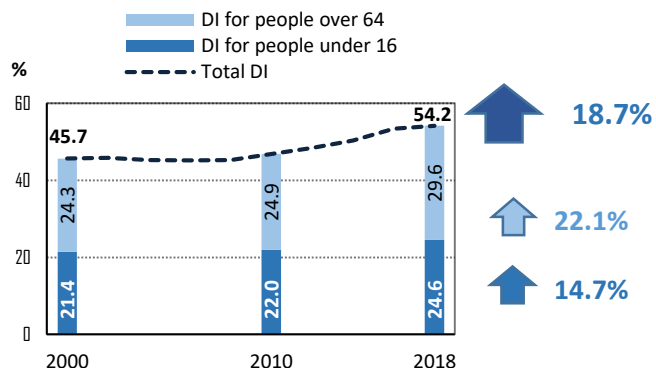




SOCIO-ECONOMIC DETERMINANTS

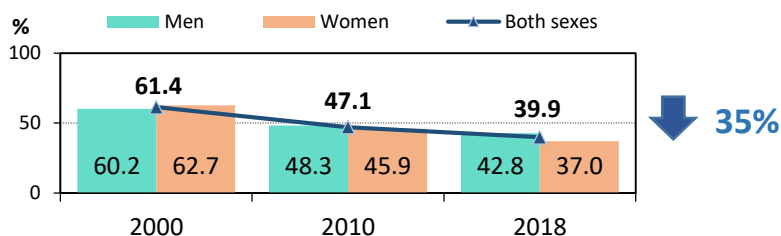
DEPENDENCY INDEX

The Dependency Index (DI) in Spain is **54.2%**, with a rising trend among older people (**29.6%**) and a stable trend for the young (**24.6%**).



PEOPLE AGED 25 TO 64 WITH BASIC OR LOWER-LEVEL EDUCATION

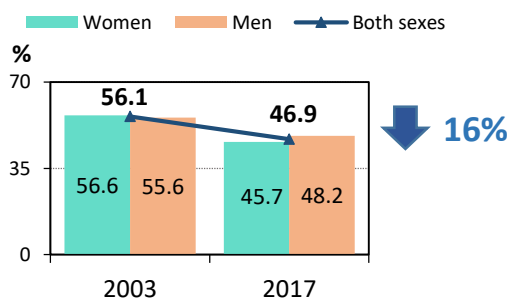
In the past 18 years, the percentage of people with basic or lower-level education **has decreased in all Autonomous Communities and Autonomous Cities.**



PEOPLE FROM A LOW SOCIAL CLASS

The percentage of people from a low social class is **46.9%**

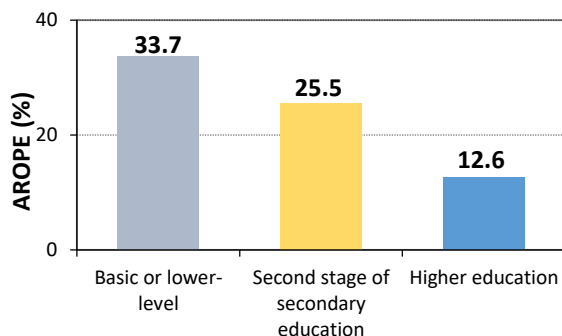
This is higher for **WOMEN (48.2%)** than for **MEN (45.7%)**



AT-RISK-OF-POVERTY RATE (AROPE)

The at-risk-of-poverty or social exclusion rate for 2018 was **26.1%**

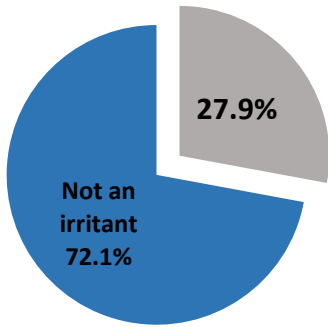
The **7th highest** in the EU-28



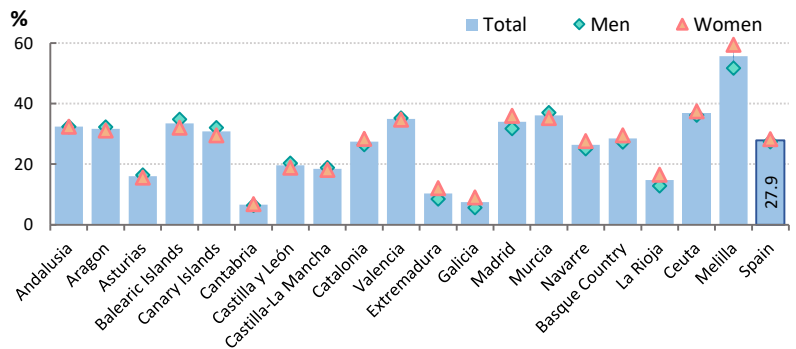


ENVIRONMENTAL DETERMINANTS

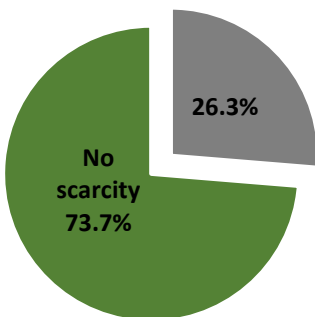
NOISE



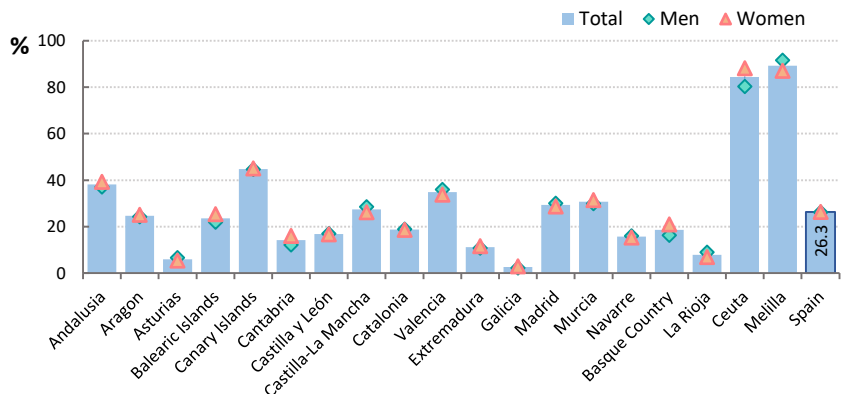
27.9% of Spain's population finds the noise coming from outside their home to be an irritant.



SCARCITY OF GREEN AREAS



26.3% of Spain's population states that there is a scarcity of green areas near their home.



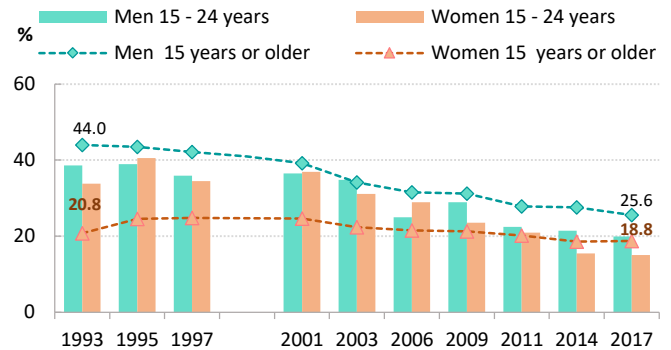
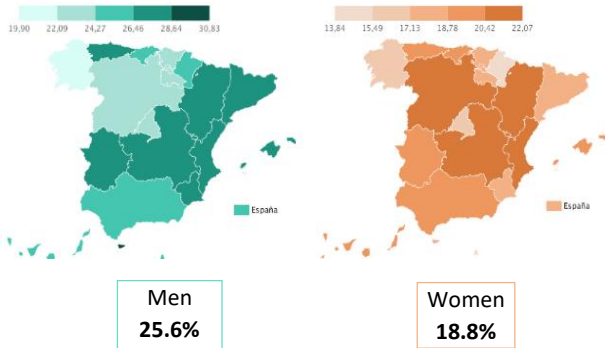


LIFESTYLE



TOBACCO CONSUMPTION

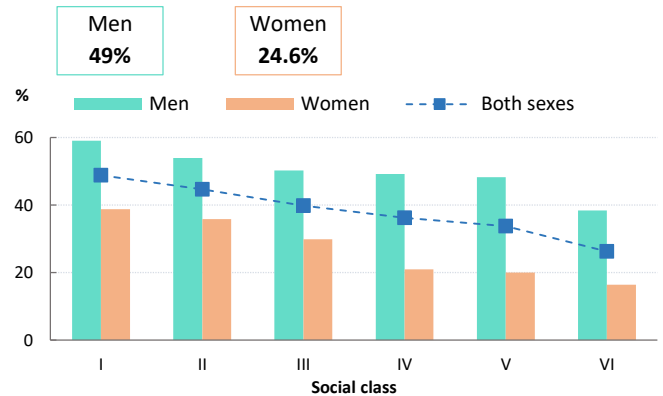
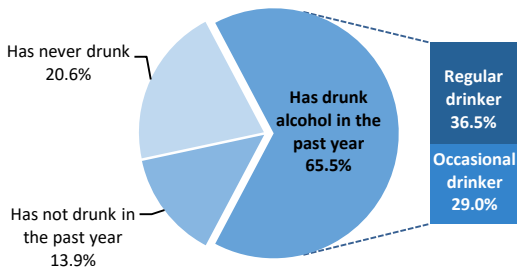
22.1% of the population aged 15 or older **smokes every day.**



ALCOHOL CONSUMPTION

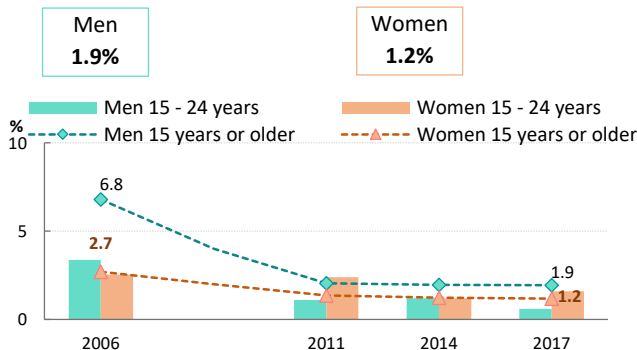
Regular alcohol consumption

36.5% of the population aged 15 or older **consumes alcohol regularly.**



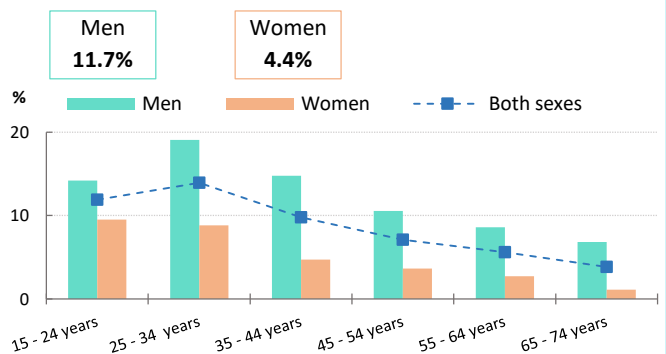
High-risk consumption of alcohol

1.6% of the population aged 15 or older has a **high-risk consumption of alcohol.**



Binge drinking of alcohol

8% of the population aged 15 or older **binge drinks alcohol.**





OBESITY

2 out of every **10** adults are **obese**.



1 out of every **10** children is **obese**.



5 out of every **10** adults are **overweight**.



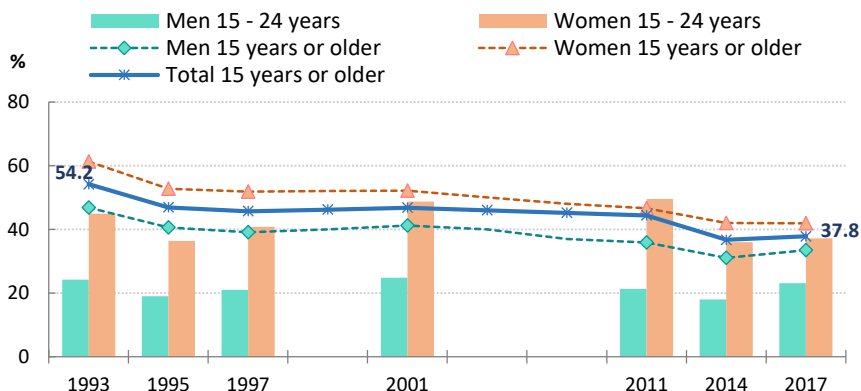
3 out of every **10** children are **overweight**.



PHYSICAL ACTIVITY

Sedentary leisure time

37.8% of the population aged **15 and older** claims to be sedentary.



Level of physical activity

Population aged 15 to 69

35.3%



do not reach the healthy level of physical activity recommended by the WHO.

Group aged 15 to 24

32.6%
Women

23.2%
Men

do not reach the recommended level of physical activity.

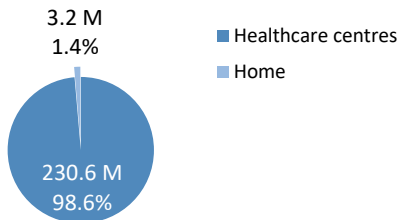


HEALTHCARE

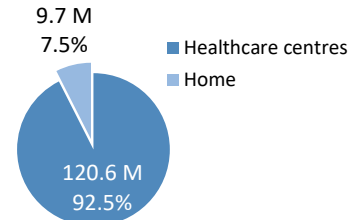
HEALTHCARE ACTIVITY

Primary care consultations

DOCTORS in NHS PRIMARY HEALTHCARE have **233.8 million consultations** per year: **98.6%** of them at **HEALTHCARE CENTRES** and only **1.4%** of them at **PATIENTS' HOMES**.



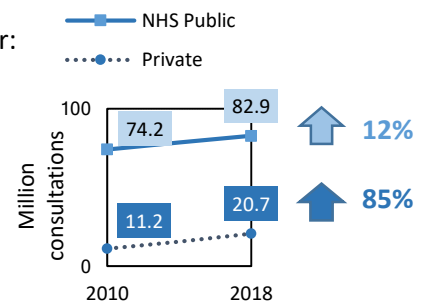
NURSES in NHS PRIMARY HEALTHCARE have **130.3 million consultations** per year: **92.5%** of them at **HEALTHCARE CENTRES** and **7.5%** at **PATIENTS' HOMES**.



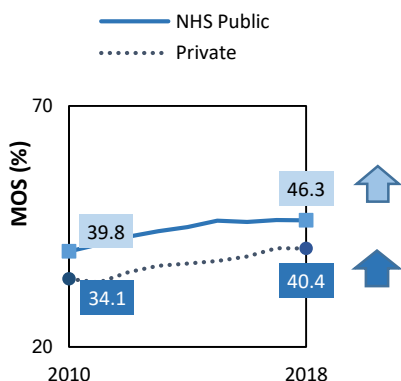
Specialized care consultations

In **SPECIALIZED CARE**, there are **5.4 million ADMISSIONS** per year: **5.3 M** in **ACUTE CARE HOSPITALS**, **76.9%** in the **NHS**. **0.1 M** in **LONG-TERM CARE HOSPITALS**, **83.6%** in the **NHS**.

And **103.6 million CONSULTATIONS**, **80.0%** in the **NHS**.



Outpatient surgery in the National Health System



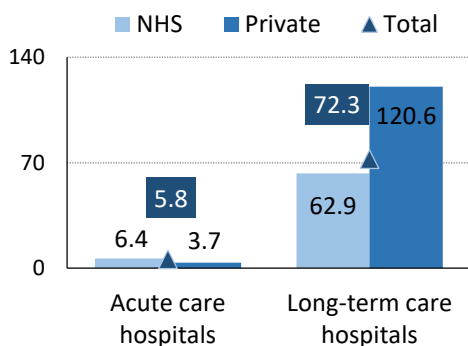
Major outpatient surgery in NHS hospitals was **46.3%**, and in private hospitals, **40.4%**

HEALTHCARE ACTIVITY

Stays at acute care hospitals

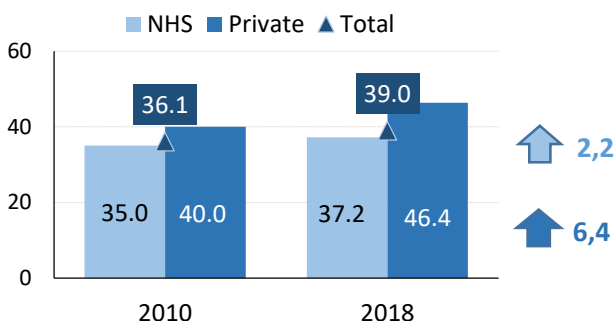
Average stay (days) at hospitals depending on type of care and sector (NHS or private)

The average stay of patients admitted to NHS hospitals is **7.8 days**, with **6.4** in acute care hospitals and **62.9** in long-term care hospitals.

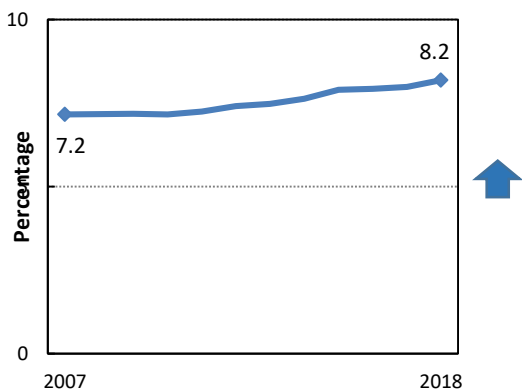


Turnover rate in hospitals depending on sector (NHS or private)

The turnover rate in **NHS hospitals** is **37.2**, whereas in **private hospitals** it is **46.4**.



Overall percentage of readmissions in acute care hospitals of the National Health System

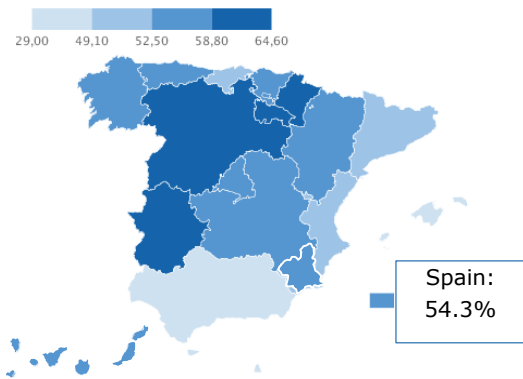


The overall percentage of **readmissions in NHS acute care hospitals** during the 30 days after discharge is **8.2%**, with a slightly upward trend.

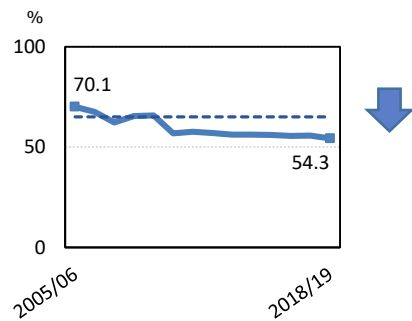
PREVENTION

Vaccination against influenza

Vaccination coverage of people aged 65 and older was **54.3%** in the 2018/2019 campaign.



This reflects a **downward trend** since the 2006/07 campaign, deviating from the objective set in Spain of reaching at least 65%.



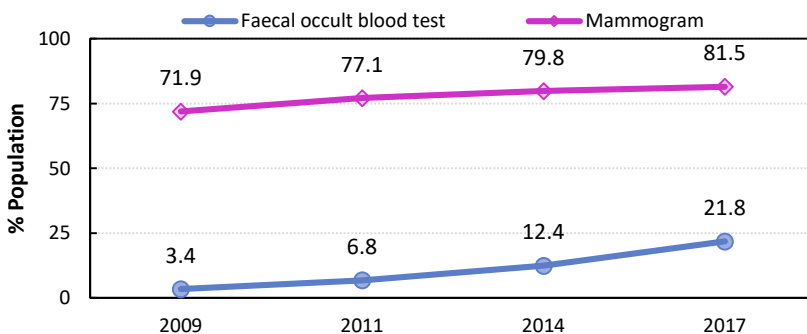
Cancer screening



8 out of every **10** women have undergone **breast cancer detection tests** within the recommended periods.



2 out of every **10** people have undergone **early colorectal cancer detection tests** within the recommended period.



The evolution over time shows an **upward trend** for both types of screening.

↑ **10** percentage points

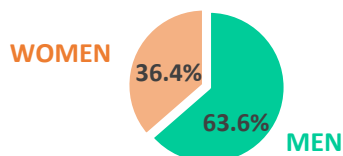
↑ **18** percentage points

CARE FOR CARDIOVASCULAR DISEASE AND RISK FACTORS

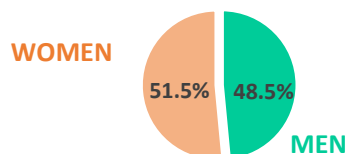
Care for cardiovascular disease

PRIMARY CARE

22.6 million consultations per year for people with **ischaemic heart disease**, with an annual rate of **24.3 consultations**.



17.4 million consultations per year for people with **cerebrovascular disease**, with an annual rate of **25.8 consultations**.



SPECIALIZED CARE

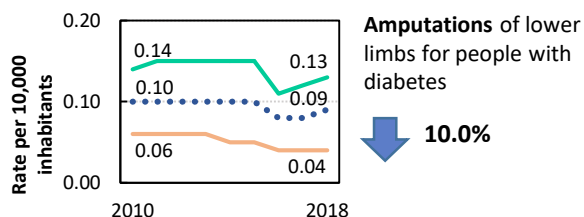
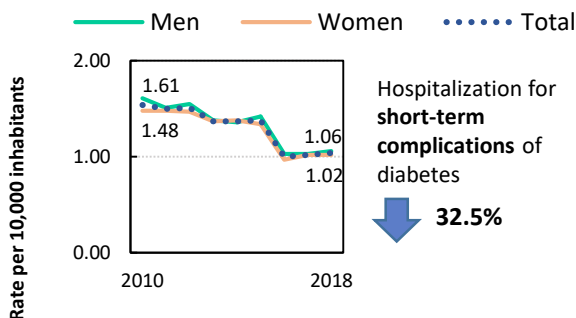
3,588,691 cardiology consultations per year, approximately **75%** in public centres.

Care for diabetes mellitus

PRIMARY CARE has **70.2 million consultations** per year for people with diabetes, **49.5%** of them with **MEN** and **55.5%**, with **WOMEN**, with an annual rate of **22.9 consultations** per person with diabetes.



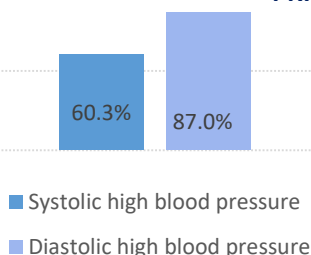
3 out of every **4** diabetic persons have values of glycated haemoglobin **< 7.5%**.



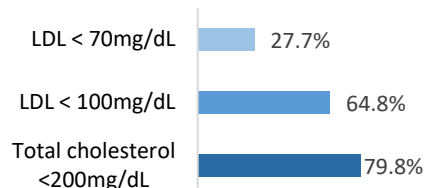
Care for high blood pressure

PRIMARY CARE

Percentage of patients with high blood pressure who have it under proper control:



Percentage of patients with cardiovascular disease who have:



CARE FOR MENTAL DISORDERS

Consultations

PRIMARY CARE

PRIMARY CARE in the NHS has **174.9 million consultations** per year for mental disorders, **38.6%** of them with **MEN** and **61.4%** with **WOMEN**, with an annual rate of **14.2 consultations** per person with mental disorders.

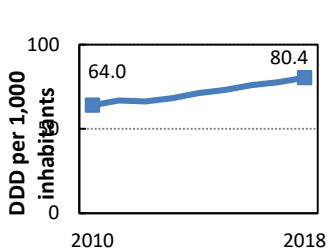
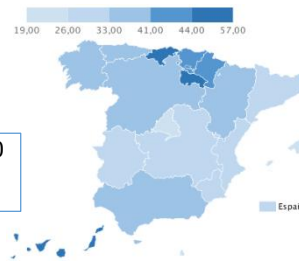
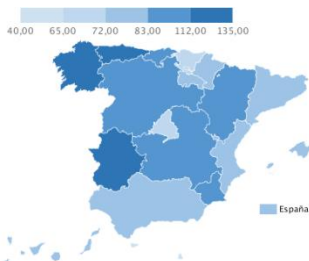
SPECIALIZED CARE

SPECIALIZED PSYCHIATRIC CARE has **5,457,855 consultations** per year, **95%** of them in public centres.

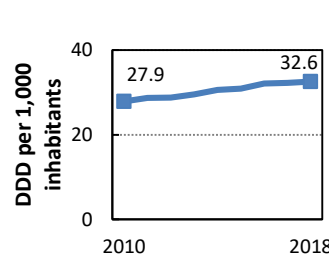
Drug consumption

CONSUMPTION OF ANTIDEPRESSANTS

CONSUMPTION OF HYPNOTICS AND SEDATIVES

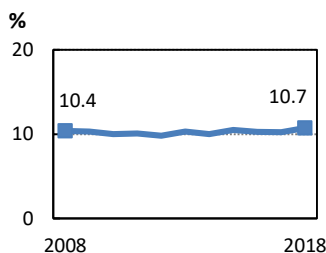


Consumption of antidepressants has increased by **16.4** percentage points



Consumption of hypnotics and sedatives has increased by **4.7** percentage points

Emergency psychiatric readmissions



Emergency psychiatric readmissions have remained stable at approximately **10%**.

TREATMENT FOR MALIGNANT TUMOURS

Primary care consultations and hospitalization

PRIMARY CARE

PRIMARY CARE has **31.7 million consultations** per year for people diagnosed with a malignant tumour, **50%** of them with **MEN** and **50%** with **WOMEN**.

SPECIALIZED CARE

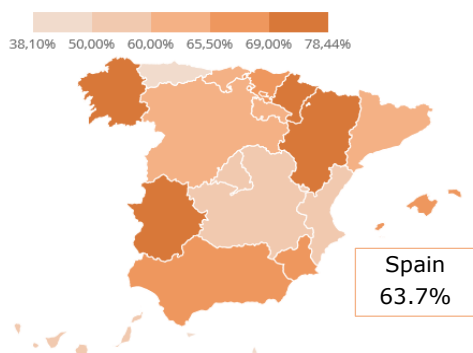
Hospitalizations per year for malignant tumours have been **71.3** per 10,000 inhabitants.

Breast-conserving surgery for breast cancer

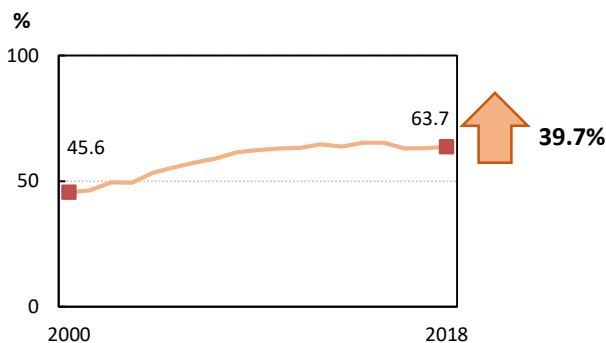


6 out of every **10 breast cancer surgeries** are carried out with a **conservative approach**.

The percentage of breast-conserving surgery for breast cancer is **63.7%**.



Breast-conserving surgery for breast cancer has **increased by 39.7%**.



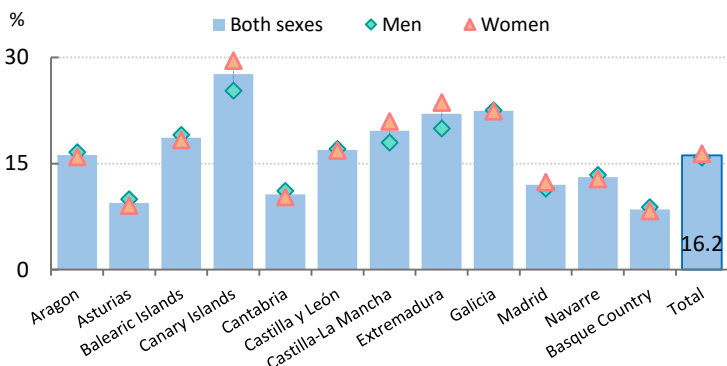


SAFETY



APPROPRIATE DRUG CONSUMPTION AMONG OLDER PERSONS

Polymedication

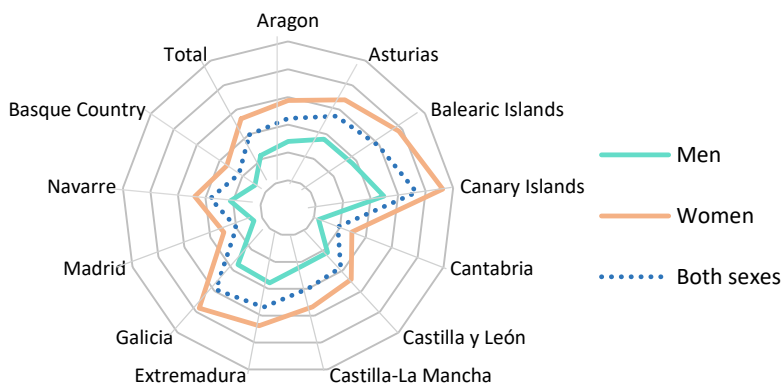


16.2% of people aged 65 and older are polymedicated.*

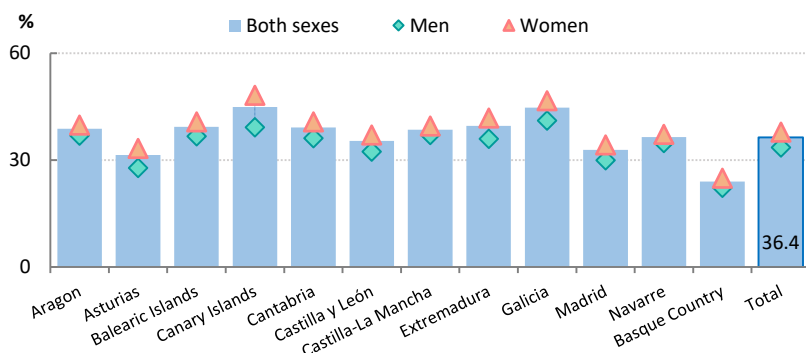
*Polymedication is understood as the consumption of 6 or more pharmaceutical drugs for at least 6 months

Long half-life benzodiazepines

6.0% of people aged 65 and older were dispensed at least one pack of long half-life benzodiazepines during the year.



Hypolipidemic drugs



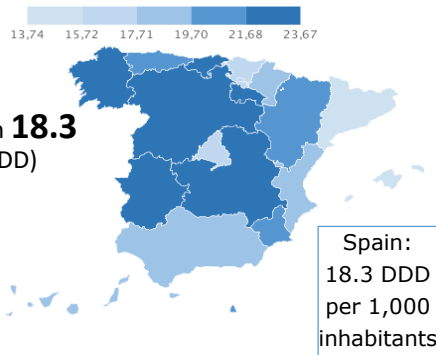
36.4% of people aged 75 and older without a cardiovascular disease were dispensed at least one pack of hypolipidemic drugs during the year.



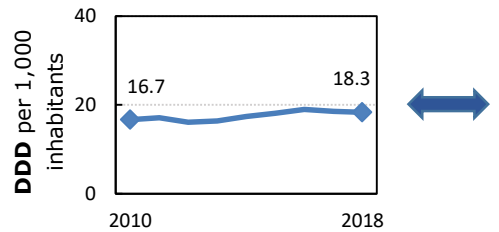
HEALTHCARE-ASSOCIATED INFECTIONS

Consumption of antibiotics

Systemic antibiotic consumption has been **18.3** defined daily doses (DDD) per 1,000 inhabitants.

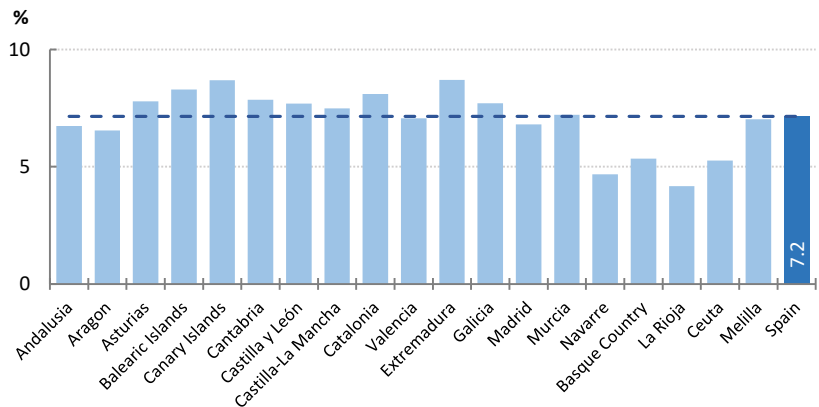


Stable trend over the past 8 years



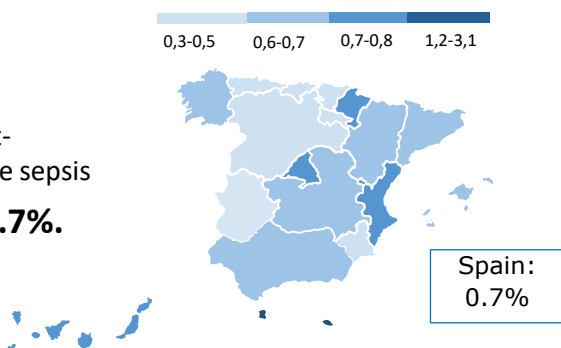
Prevalence of patients with healthcare-associated infections

7.2% of patients in acute care hospitals had at least one healthcare-associated infection.

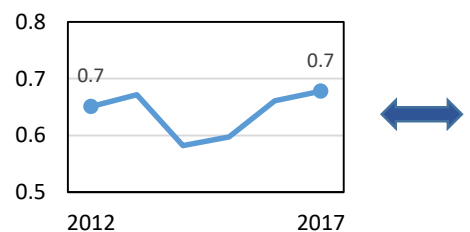


Post-operative sepsis rate

The post-operative sepsis rate is **0.7%**.



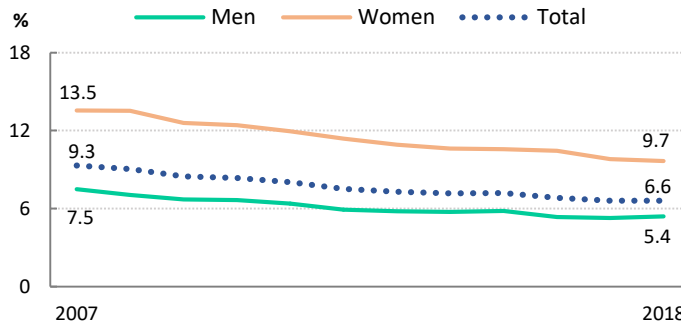
Stable trend over the past 5 years



IN-HOSPITAL MORTALITY

In-hospital mortality rate for heart attack patients

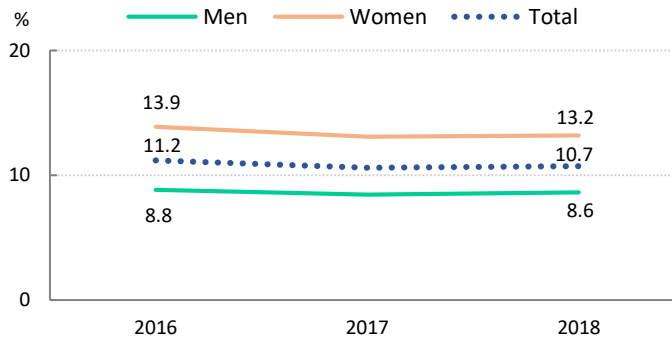
The in-hospital mortality rate for heart attack patients is **6.6%**.



Downward trend
↓ 3 percentage points

In-hospital mortality due to ischaemic cerebrovascular accident

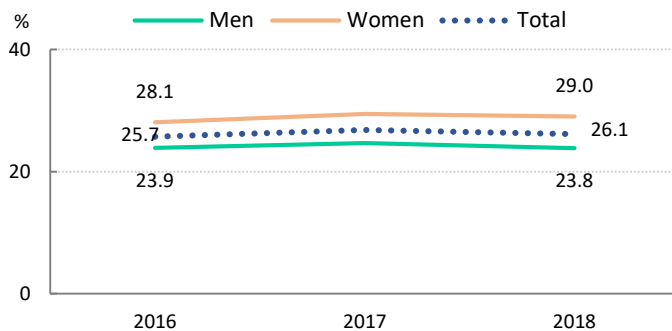
In-hospital mortality due to ischaemic cerebrovascular accident is **10.7%**.



Slightly downward trend in the past 3 years
↓

In-hospital mortality due to haemorrhagic cerebrovascular accident

In-hospital mortality due to haemorrhagic cerebrovascular accident is **26.1%**.



Stable trend in the past 3 years
↔



PATIENTS' EXPERIENCE



ASSESSMENT OF THE PUBLIC HEALTHCARE SYSTEM

Satisfaction with the public healthcare system

Satisfaction with the public healthcare system

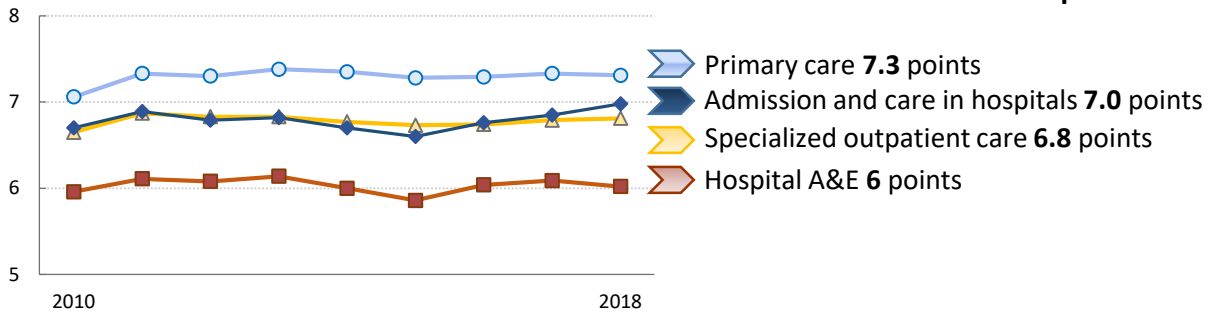
6.6 points

(very dissatisfied) **1** **10** (very satisfied)

Assessment of healthcare levels

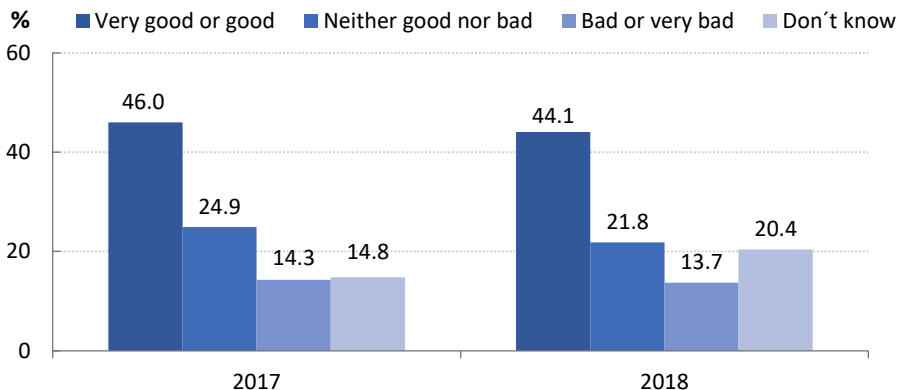
- Primary care
- Hospital A&E
- Specialized outpatient care
- Admission and care in hospitals

The population's general opinion of the functioning of the different levels and services of the NHS is **positive**.



COORDINATION BETWEEN HEALTHCARE LEVELS

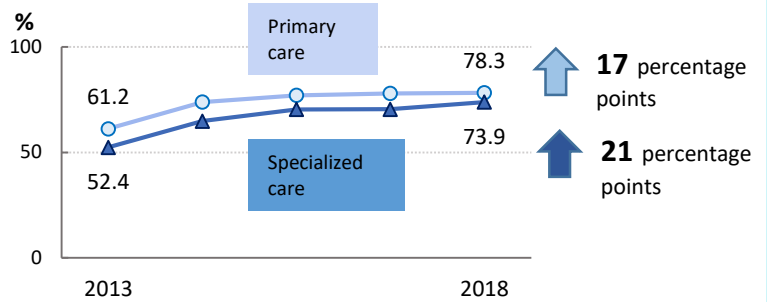
The perception of good coordination between healthcare levels is lower than **50%**.



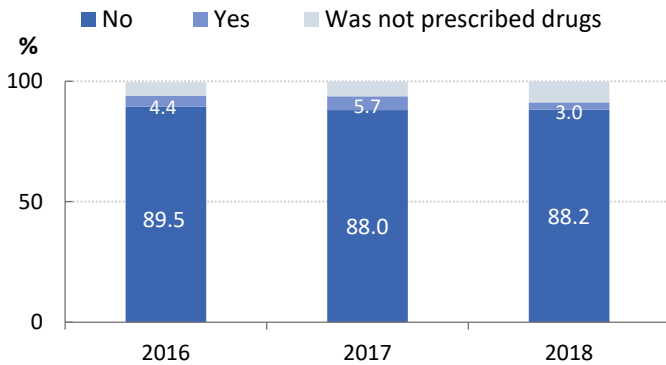


PARTICIPATION IN DECISION-MAKING REGARDING THEIR HEALTHCARE

78.3% state that they participate in decision-making regarding their health condition and treatment in primary care, and **73.9%** in specialized care.



STATED LACK OF ACCESS TO PRESCRIPTION DRUGS FOR ECONOMIC REASONS

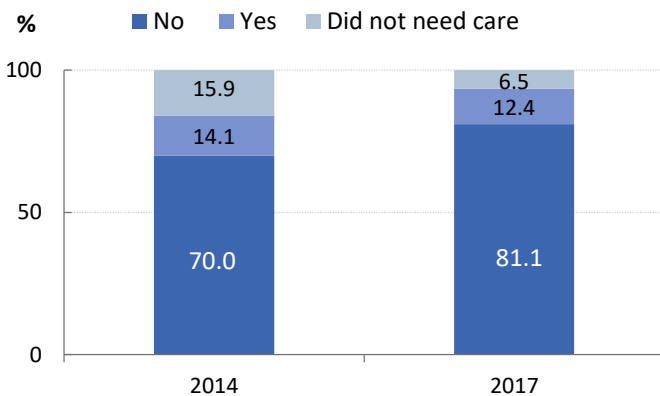


3.0% state that they have problems accessing prescription drugs for economic reasons.

↓ **1.4** percentage points



STATED LACK OF ACCESS TO DENTAL CARE FOR ECONOMIC REASONS



12.4% state that they have problems accessing dental care for economic reasons.

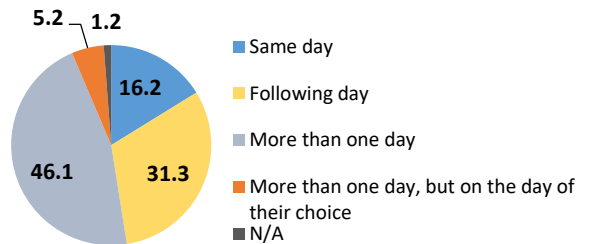
↓ **2** percentage points



ACCESSIBILITY

WAITING TIMES IN PRIMARY CARE

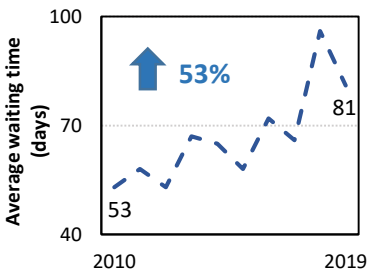
16.2% of the people surveyed were attended to on the **same day** that they asked for the appointment, **31.3%** the **following day** and **46.1%** had to wait **more than one day**.



WAITING TIMES IN SPECIALIZED CARE

CONSULTATIONS

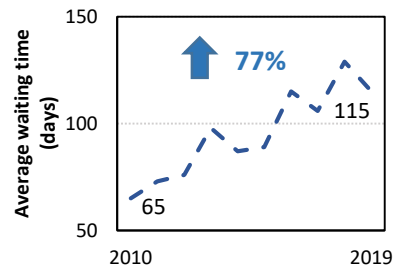
The average waiting time for consultations at June 2019 was **81 days**



Waiting times for specialized care continue to **INCREASE**.

NON-URGENT SURGERY

The average waiting time for non-urgent surgery at June 2019 was **115 days**



SPECIALTIES WITH THE LONGEST WAITING TIMES

TRAUMATOLOGY: 96 days; 9.5 patients/1,000 inhab.
OPHTHALMOLOGY: 83 days; 8.3 patients/1,000 inhab.

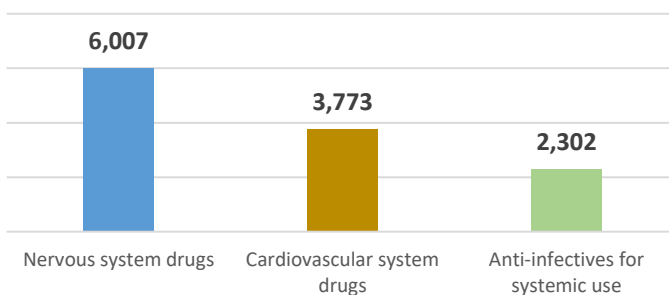
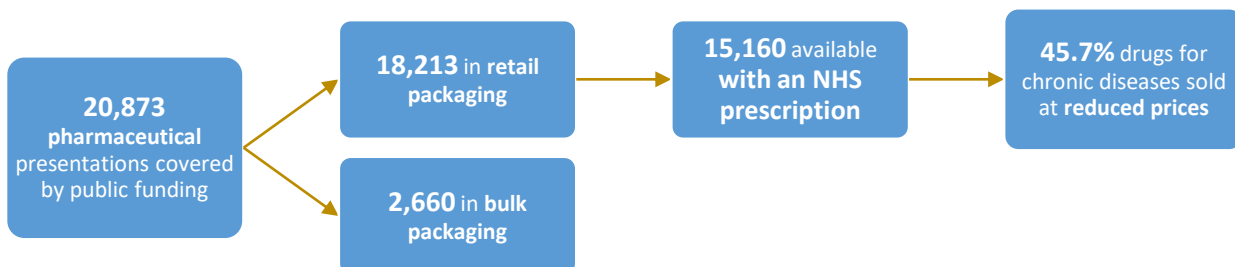
The percentage of patients who have been **WAITING MORE THAN 6 MONTHS** is **15.8%**

Longest WAITING TIMES:
PLASTIC SURGERY (351 days)
NEUROSURGERY (153 days)
THORACIC SURGERY (139 days)

Highest no. of PATIENTS on waiting lists :
TRAUMATOLOGY
 (126 days; 3.8 patients/1,000 hab.)



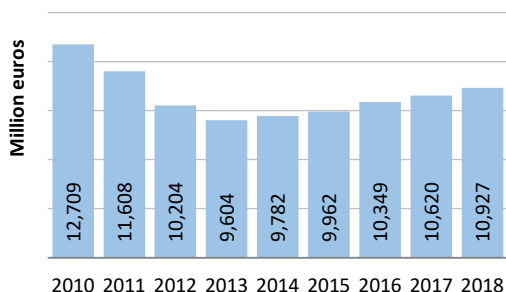
PHARMACEUTICAL BENEFITS



Main presentations covered by public funding (number)

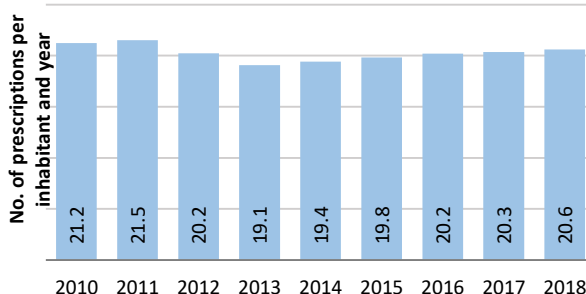
CONSUMPTION THROUGH NHS MEDICAL PRESCRIPTIONS AT PHARMACIES

Pharmaceutical expenditure through the invoicing of NHS drug prescriptions



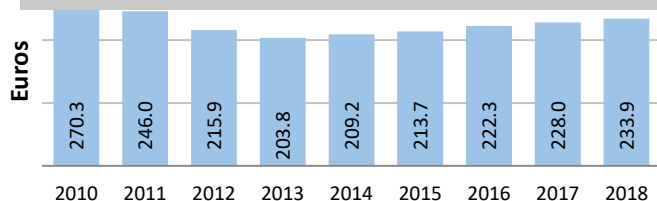
In 2018, the pharmaceutical expenditure charged to public funds totalled 10.93 billion euros, up 2.9% compared with 2017.

NHS prescriptions per inhabitant and year



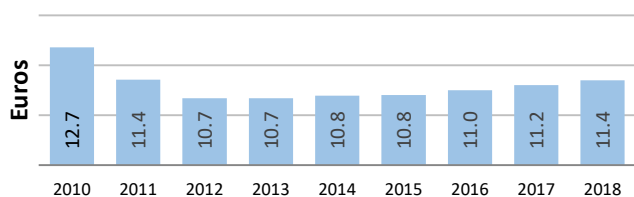
In 2018, the consumption of prescriptions per inhabitant was 20.6, up 1.5% compared with 2017.

NHS pharmaceutical expenditure per inhabitant and year



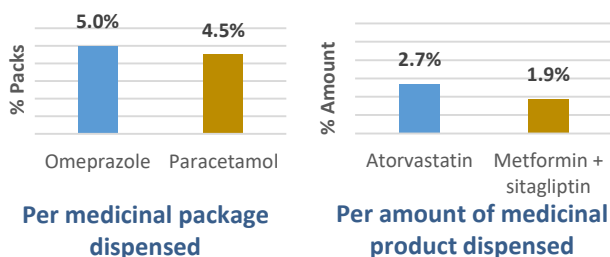
The **expenditure per inhabitant and year** in 2018 amounted to **233.9 euros**, up **2.6% compared with 2017**. Since 2013 the expenditure per inhabitant has been increasing, although the figure for 2018 remains below 2010 values (270.3 euros).

Average expenditure per NHS prescription invoiced

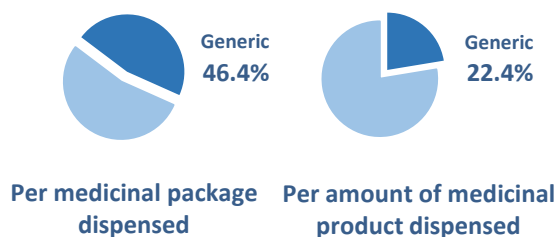


The **average expenditure per prescription** in 2018 was **11.4 euros**, up by 0.2 euros compared with the previous year.

Principal active ingredients consumed

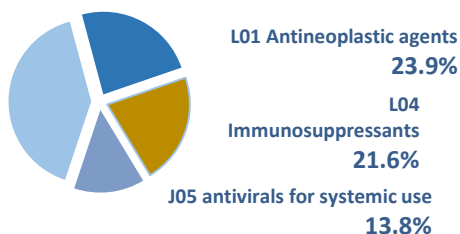


Consumption of generic drugs

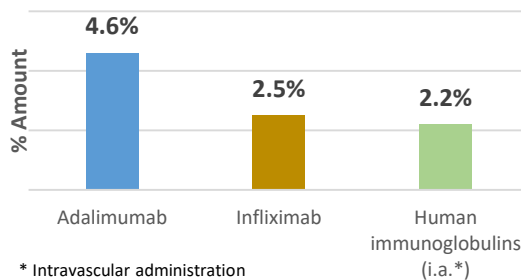


HOSPITAL PHARMACEUTICAL SERVICE

Principal therapeutic sub-groups consumed at manufacturers' prices



Principal active ingredients consumed at manufacturers' prices



* Intravascular administration



USE

ORDINARY CARE ACTIVITY

Primary care

The average frequency with which the Spanish population **VISITS A DOCTOR** is

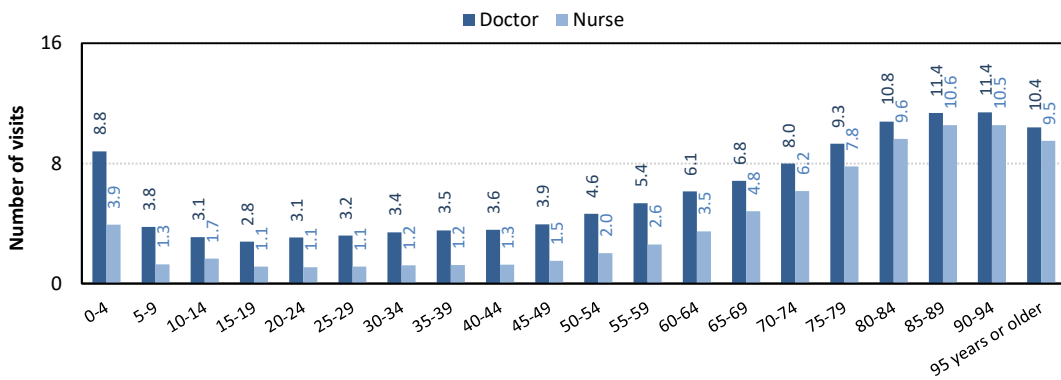
5.1

visits per person and year.

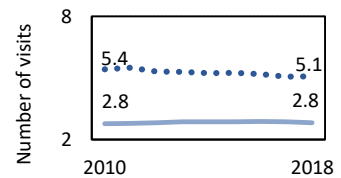
The average frequency with which the Spanish population **VISITS A NURSE** is

2.8

visits per person and year.



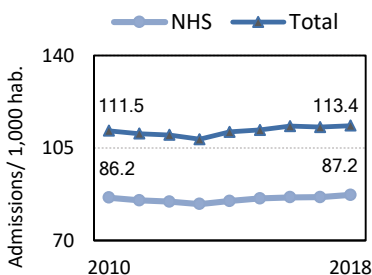
The average number of visits to see a doctor has fallen slightly, while the average number of visits to be seen by a nurse has remained stable over time.



Specialized care

87.2 ADMISSIONS

per 1,000 inhabitants and year, in **NHS ACUTE CARE HOSPITALS**



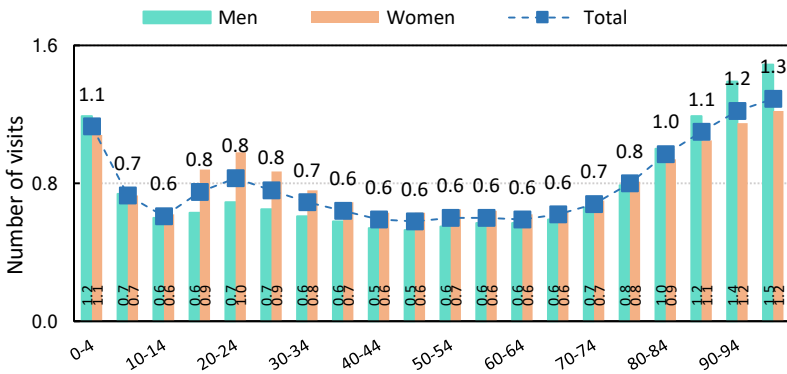
SPECIALISTS consultations at NHS HOSPITALS amount to

1.7 consultations/inhab.

80% of specialized care consultations at acute care hospitals take place in the **NHS**.

URGENT CARE

Primary care

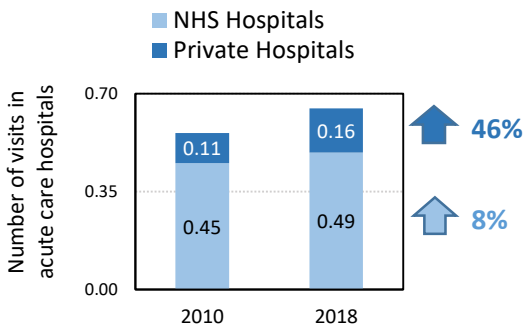


There were **28.7 million** urgent consultations in **PRIMARY CARE**.

There were **0.62** urgent consultations per inhabitant and year:
DOCTORS: 0.59
NURSES: 0.26

The data on urgent primary care consultations reflect **SIGNIFICANT DIFFERENCES BY SEX** which ARE **INVERTED** over the individual's lifespan.

Specialized care

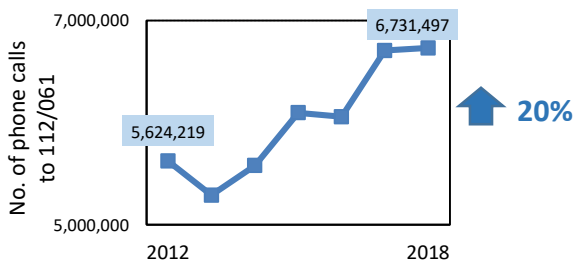


23 million urgent consultations are attended to at **NHS ACUTE CARE HOSPITALS**, **76%** of the total urgent hospital consultations.

NHS HOSPITAL consultations amount to **0.49** per inhabitant and year.

Urgent hospital consultations show a clear upward trend since 2010.

Phone calls to 112/061 for urgent and emergency care services



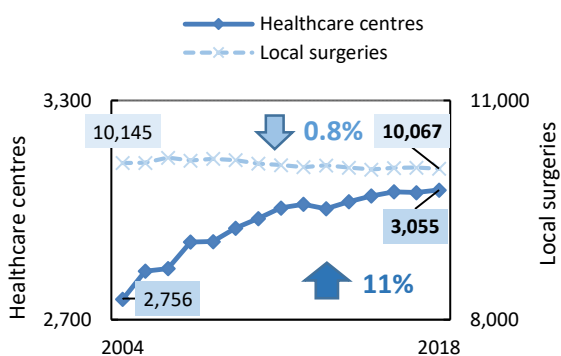
Phone calls to **112/061** stand at **6.7 million**, reflecting an irregular evolution, but with a clear **rise in numbers**.

The number of calls for care is **46.3 per 1,000 inhabitants**.



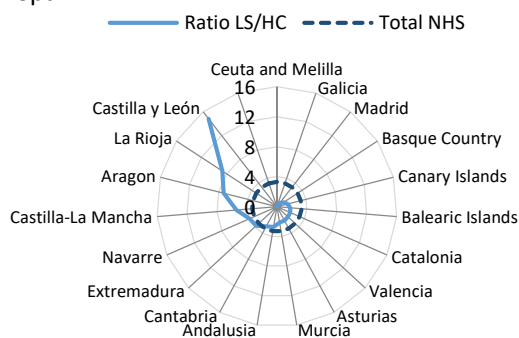
PHYSICAL RESOURCES

PRIMARY CARE



Since 2004 the number of **HEALTHCARE CENTRES** has been increasing to amount to **3,055** in 2018, a trend that has become stable over the past 4 years.

The average number of **local surgeries per healthcare centre** is **3.3**, with considerable variability between territories, which reflects the variable geographical dispersion of the population in Spain.

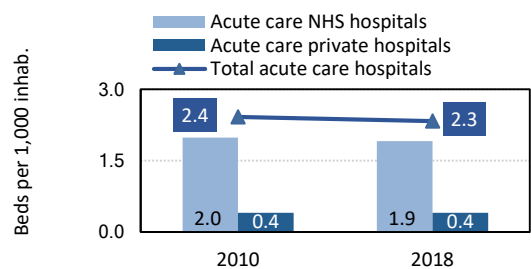
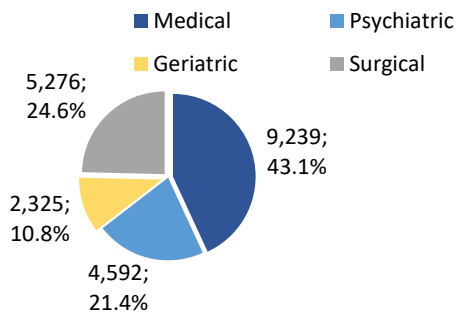
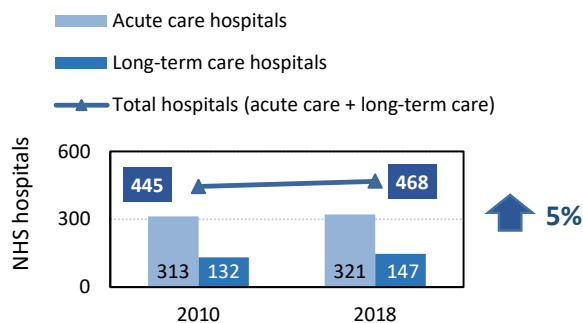


SPECIALIZED CARE

Spain has **806 HOSPITALS**, representing 1.7 hospitals per 100,000 inhabitants.

The **NHS** has **468 HOSPITALS**:
321 ACUTE CARE HOSPITALS and
147 LONG-TERM CARE HOSPITALS.

The **NHS** has **18,839 day hospital places**, representing **87.9%** of the total in the health system.



The network of NHS hospitals has **193 RADIOTHERAPY MACHINES**, representing **79.8%** of the 242 machines available in the Spanish health system.

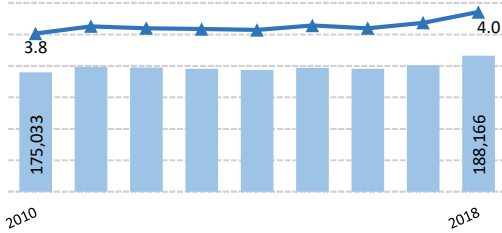
In 2019 the NHS has **279 specialist centres, services and units**



HUMAN RESOURCES

Practising doctors (public and private sector)

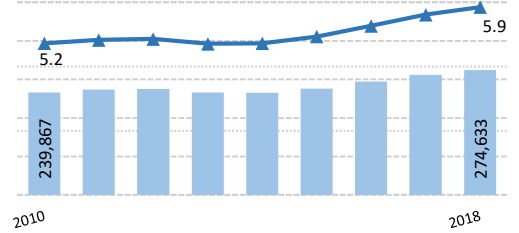
Number of doctors Rate per 1,000 inhabitants



↑ 6.4% (from 3.8 to 4.0 doctors per 1,000 people)

Practising nurses (public and private sector)

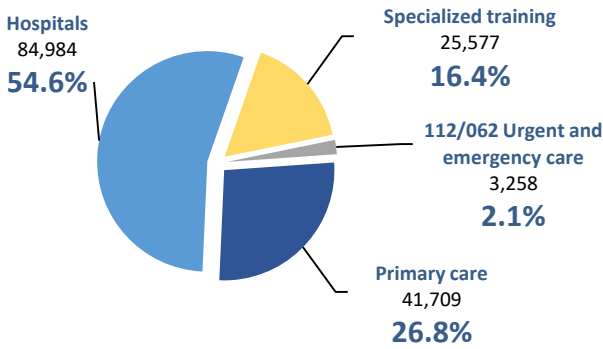
Number of nurses Rate per 1,000 inhabitants



↑ 14.5% (from 5.2 to 5.9 nurses per 1,000 people)

NHS DOCTORS

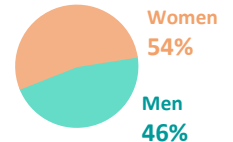
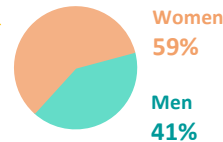
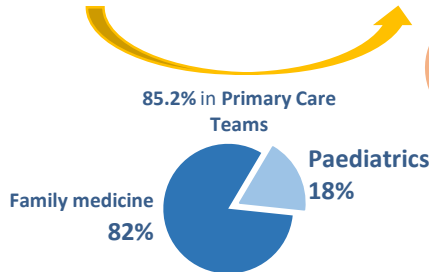
54.6% of NHS doctors work in hospitals, and 26.8% in primary care.



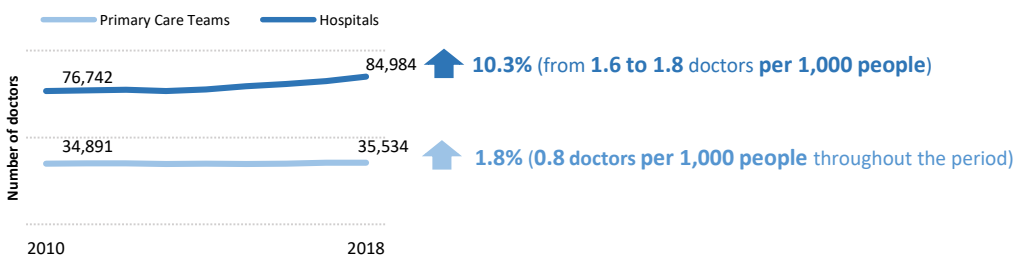
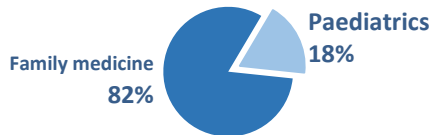
3.3 doctors per 1,000 people

Primary Care Teams:
0.8 doctors per 1,000 people

Hospitals:
1.8 doctors per 1,000 people

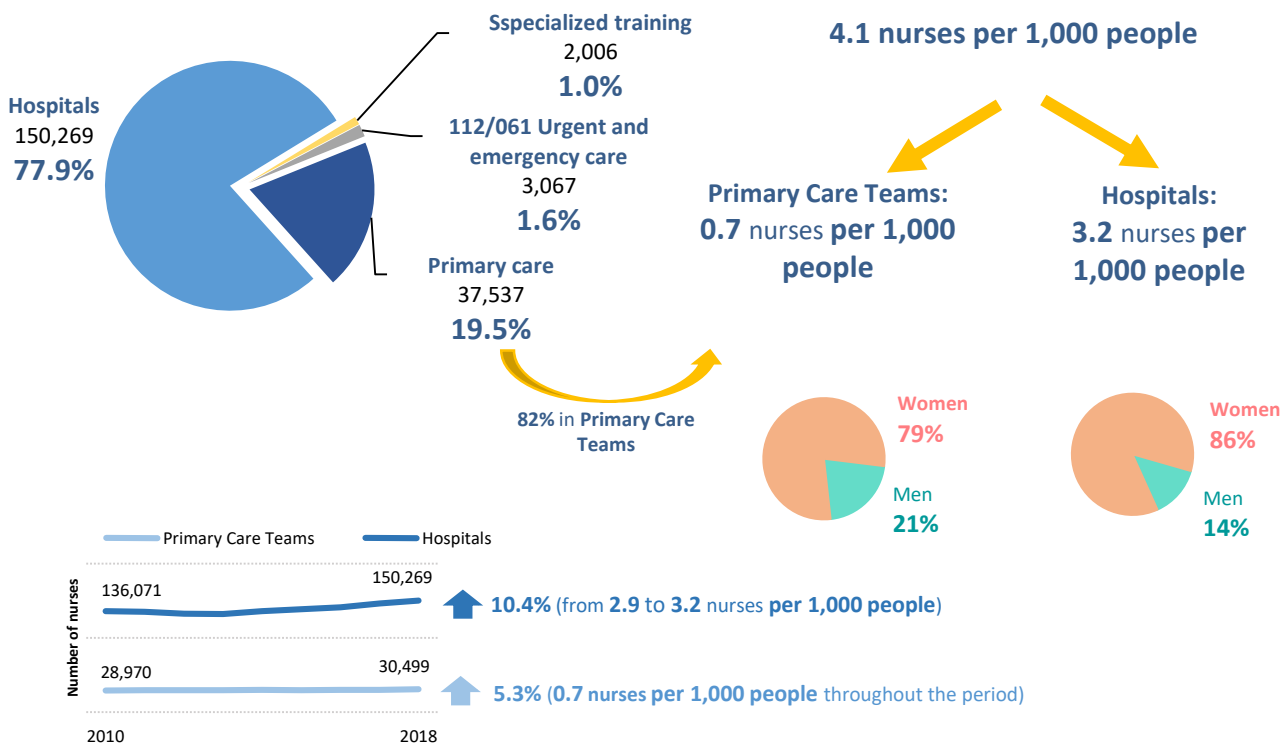


85.2% in Primary Care Teams

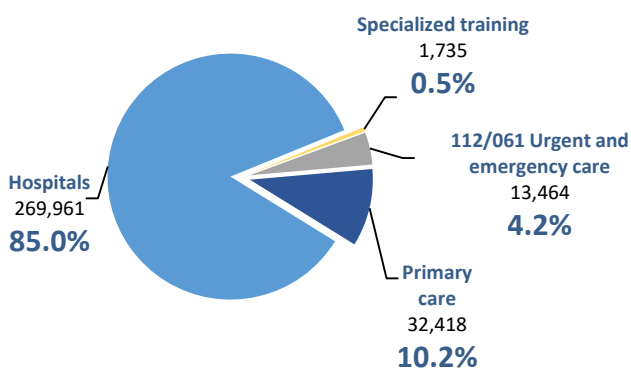


NHS NURSES

77.9% of NHS nurses work at hospitals, and 19.5% in primary care.



OTHER NHS PROFESSIONALS



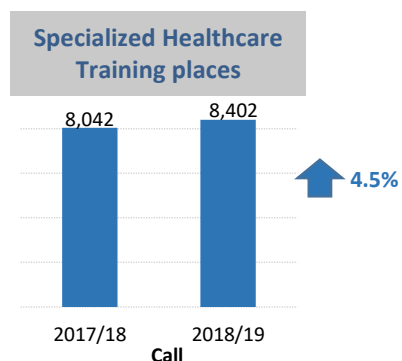
The NHS has an additional 317,578 professionals^(*), in addition to doctors and nurses, and **85%** of these work in hospitals and **10.2%** in primary care.

6.8 other professionals per 1,000 people

(*) Includes health and non-health professionals.

SPECIALIZED HEALTHCARE TRAINING

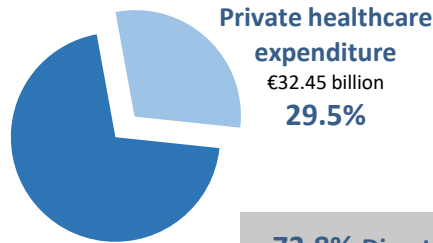
The number of places for Specialized Healthcare Training in the 2018/19 call for applications has increased by **4.5%** compared with the previous call.





HEALTHCARE EXPENDITURE

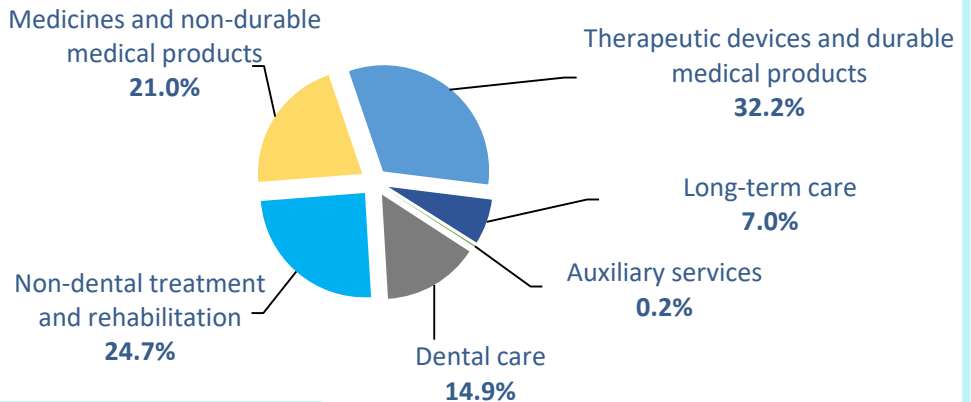
Public healthcare expenditure
€77.40 billion
70.5%



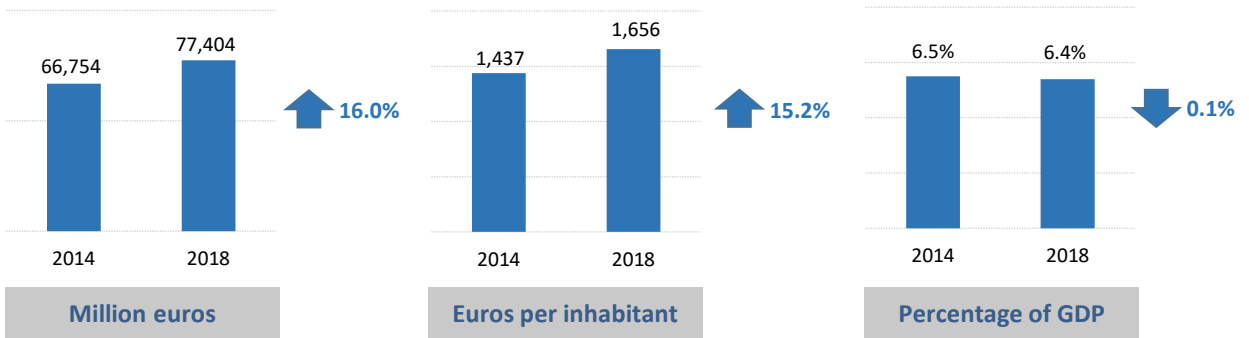
The healthcare expenditure of the public administrations accounts for 70.5% of total healthcare expenditure.

73.8% Direct payments by households

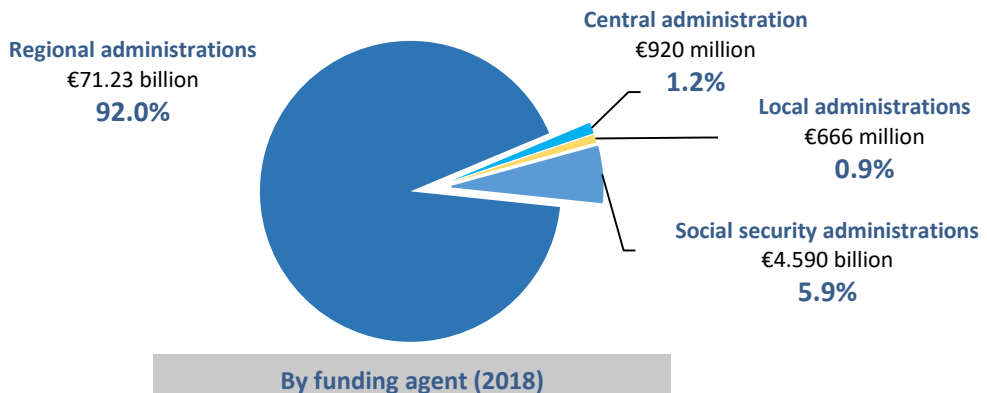
73.8% of the private healthcare expenditure is borne through direct payments by households.



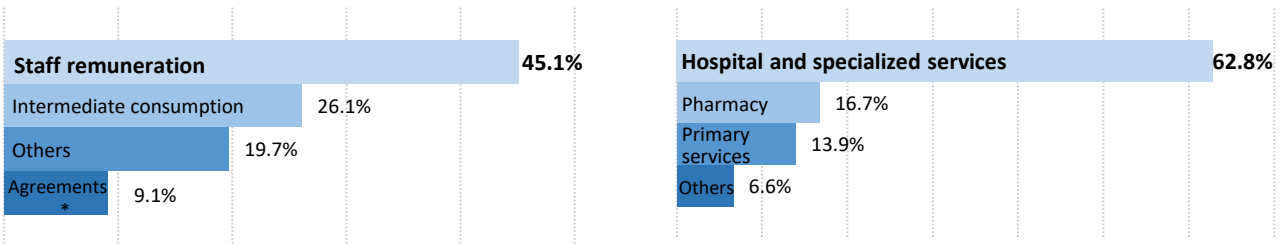
PUBLIC HEALTHCARE EXPENDITURE



During the 2014-2018 period, public healthcare expenditure increased by 16.0% and public healthcare expenditure per inhabitant, by 15.2%. Public healthcare expenditure as a percentage of GDP fell by 0.1 percentage points.



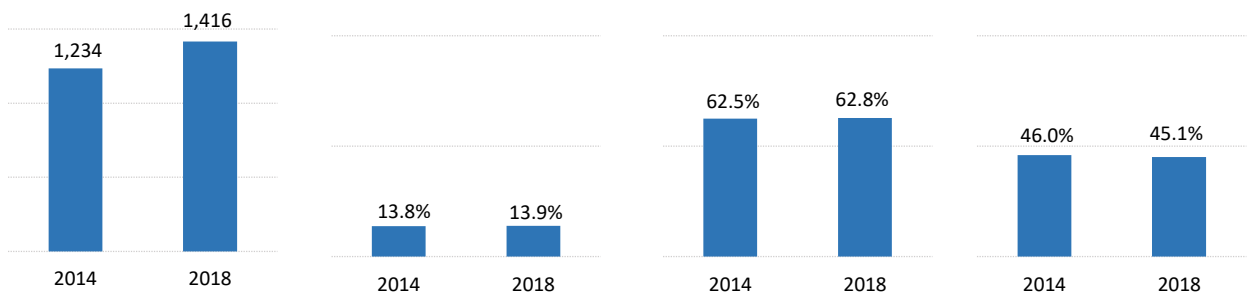
EXPENDITURE ON PUBLIC HEALTHCARE MANAGED BY THE AUTONOMOUS COMMUNITIES



*with private healthcare providers

Economic classification

Functional classification



Euros per inhabitant

Percentage of expenditure on primary services

Percentage of expenditure on hospital and specialized services

Percentage of expenditure on staff remuneration

↑ 14.7%

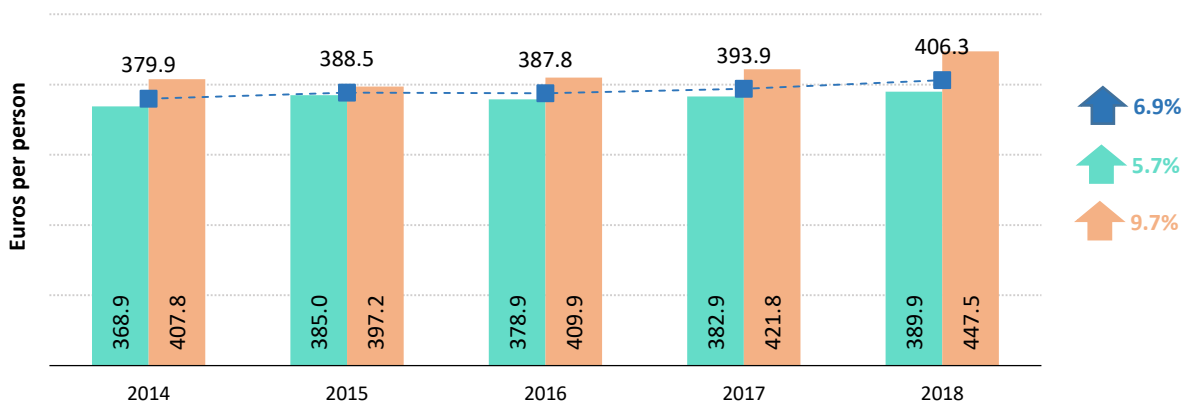
↑ 0.1%

↑ 0.3%

↓ 0.9%

AVERAGE ANNUAL EXPENSE PER PERSON ON HEALTHCARE GOODS AND SERVICES

Men Women Both sexes



By sex, **out-of-pocket expenditure** has been higher for women throughout the five-year period, with the average expenditure being **9.4% greater for women than for men**.

The 2019 Annual Report of the National Health System forms part of the series of reports begun in 2003, and offers summarized information on the state of the National Health system and its evolution over time. This new, shorter edition seeks simplicity and visibility of information supported by a greater number of charts and infographics, especially in the Executive Summary.