Is MD unemployment in Europe finally coming to an end?

Europe’s long-standing oversupply of physicians finally appears to be coming to an end, with the United Kingdom and Ireland already scrambling to fill vacant positions.

Since reaching a maximum of nearly 100,000 doctors in 1995, the number of unemployed physicians in Europe has been falling steadily, according to surveys by the European Federation of Salaried Doctors. Europe’s oversupply problem began 40 years ago with explosive growth in the number of physicians being trained across the continent. “The introduction of [student quotas] in medicine has led to the present decreasing growth rate in physician numbers,” says Dr. Vincenzo Costigliola, president of the European Medical Association. These quotas, which have always existed in the UK, began appearing in other countries during the 1980s.

There also may be market reasons for the declining numbers, Costigliola adds: “I think that medicine is not [as] fashionable a career any more.”

In Germany, the government has not only taken steps to control the number of doctors being educated but also created new positions for existing specialists. According to the Central Placement Office in Bonn, there was a 16% drop in unemployment among consultants between 1999 and 2000, and a 6% drop among GPs; today, only 1.9% of German doctors are without work, and some hospitals are having trouble filling vacancies for senior consultants.

In Italy the traditional policy of open access to medical schools has led to a chronic overproduction of physicians, with MD unemployment reaching 18% in 1995. Suspicions that the large intake of undergraduates has affected the quality of Italian medical graduates has also made it difficult for these unemployed doctors to find work abroad. Italy has the lowest ratio of patients to physicians in Europe (1:177 in 1995), in contrast with the European average of 1:318 (see chart). The Canadian ratio is 1:537.

The National Federation of the Orders of Doctors and Dentists in Rome says physician unemployment in Italy has fallen in the last 2 years, but the drop has been insignificant. “The [student quotas] exist, but there is no legal means of enforcing government targets,” explained a spokesperson.

At the other end of the spectrum are the United Kingdom and Ireland, with 531 and 565 inhabitants per physician, respectively. In the UK, the government is creating positions for 7500 more consultants and 2000 more GPs by 2004. Medical school places are rising by 20%, with new medical schools opening in Norwich, Exeter and Plymouth last year.

Although more doctors are needed, Dr. Colin Smith, chair of the British Medical Association’s medical academic staff section, cautions that the quality of undergraduate training is under threat because there aren’t enough lecturers. A survey of staff levels conducted by the Council of Heads of Medical Schools in 2000 found 79 vacant posts, of which half had been unfilled for more than 6 months.

Achieving long-term equilibrium in the physician supply in Europe involves more than simply correcting imbalances — it is also susceptible to social and legislative change. The European Parliament has introduced legislation limiting the length of the work week, which is expected to diminish junior doctors’ working hours. Meanwhile, according to Costigliola, the continent-wide growth in the number of women doctors is increasing demand for flexible and part-time work. As in Canada, these trends point to a lack of physicians, not an oversupply, being the preoccupation in coming years. — Claudia Orellana, Tübingen, Germany