

# UK health service 'lagging behind' other high income countries

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Credit: George Hodan/public domain

The UK National Health Service (NHS) shows pockets of good performance, but spending, patient safety, and population health are all below average to average relative to ten other high income countries, according to a study published by *The BMJ* today.

If the NHS wants to achieve comparable [health outcomes](#), or even

improve outcomes, it needs to spend more to increase staffing numbers, long term care, and other [social services](#), they write.

The NHS, like many other healthcare systems, faces the challenge of having to meet growing demand while under pressure to reduce costs. However, comparative data on how the UK performs relative to other high income countries are lacking.

So a team of UK and US researchers set out to compare the UK health system with those of nine other high income countries, across seven key areas including spending, structural capacity, accessibility, quality, and health outcomes.

Their findings are based on data from international organisations such as Eurostat and the Organization for Economic Cooperation and Development (OECD) for the UK, Australia, Canada, Denmark, France, Germany, the Netherlands, Sweden, Switzerland, and the US.

The focus was on the most recent data available, typically 2017, as well as trends since 2010 when available and comparable.

These comparator countries were chosen because they are all [high income countries](#) that the UK tends to liken itself to, with populations that face similar burdens of illness, yet also have healthcare systems structured in different ways.

The results show that the UK spent the least per person on healthcare in 2017 (\$3825; £2955; €3417) compared with an average \$5700 for all other countries studied, and healthcare spending is growing at slightly lower levels (0.02% of GDP in the UK from 2014-17 compared with an average of 0.07%).

Although the UK has comparable numbers of people over the age of 65,

it spends less of its already low total healthcare expenditure on long term care—and a greater proportion of this comes from private sources than it does in other healthcare systems.

When it comes to the healthcare workforce, the UK had among the highest proportion of foreign trained doctors (28.6%) and nurses (15%).

Despite this, the numbers of healthcare professionals (general practitioners, specialists, nurses) are some of the lowest of all countries studied (UK 2.8 doctors per 1000 population compared with 3.5 study average), and these numbers are declining.

As the migration of healthcare professionals has decreased since 2015, the existing staffing challenges facing the NHS "will likely be further exacerbated," note the authors.

Waiting times and access to care in the UK compared favourably to other countries, but utilisation (number of hospital admissions) was lower than average.

The UK had slightly below average life expectancy (81.3 years compared with an average of 81.7), the lowest survival rates for breast and colon cancer, and the second lowest survival rates for rectal and cervical cancer.

Although several outcomes were poor, such as death rates for heart attack and stroke, the UK achieved lower than average rates of deep venous thrombosis after joint surgery and fewer [healthcare](#) associated infections.

However, maternal death in the UK was higher than average, and is increasing, while the numbers of preventable and treatable deaths were the third highest and highest respectively.

This is an observational study, so can't establish cause, and the researchers point out that the data are purely descriptive, and the interpretation of the results is sensitive to the selection of comparator countries.

Nevertheless, they conclude that while the NHS shows pockets of good performance, spending, [patient safety](#), and [population health](#) are all below average to average at best.

"Taken together, these results suggest that if the NHS wants to achieve comparable health outcomes at a time of growing demographic pressure, it may need to spend more to increase the supply of labour and [long term care](#) and reduce the declining trend in social spending to match levels of comparator countries," they conclude.

**More information:** Performance of UK National Health Service compared with other high income countries: observational study, *BMJ* (2019). [DOI: 10.1136/bmj.l6326](https://doi.org/10.1136/bmj.l6326)

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