

OECD Health Statistics 2025

Definitions, Sources and Methods

Practising dentists (ISCO-08 code: 2261)

Practising dentists provide services for patients. They include stomatologists, dental and maxillofacial surgeons.

Inclusion

- Practising dentists who have completed studies in dentistry / stomatology at university level (granted by an adequate diploma) and who are licensed to practice
- Interns (with an adequate diploma and providing services under supervision of other dentists or dental specialists during their postgraduate internship in a healthcare facility)
- Salaried and self-employed dentists delivering services irrespectively of the place of service provision
- Foreign dentists licensed to practice and actively practising in the country
- Stomatologists
- Dental surgeons
- Maxillofacial surgeons

Exclusion

- Students who have not yet graduated
- Dentists working in administration, research and in other posts that exclude direct contact with the patients
- Unemployed dentists and retired dentists
- Dentists working abroad

Note: The number should be at the end of the calendar year.

Sources and Methods

Australia

Source of data:

- 2013 onwards: **Department of Health (DoH)**. NHWDS Allied Health Practitioners Data. Data request. Also available at <http://hwd.health.gov.au/>. Data are as at the end of the re-registration period for the profession in the reference year.
- 2012: **Australian Institute of Health and Welfare 2014**. Dental workforce 2012. National health workforce series no. 7. Cat. No. HWL 53. Canberra: AIHW. Also available at www.aihw.gov.au.
- 2011: **Australian Institute of Health and Welfare 2013**. Dental workforce 2011. National health workforce series no. 4. Cat. no. HWL 50. Canberra: AIHW. Also available at www.aihw.gov.au.
- 2009: **Chrisopoulos S & Nguyen T 2012**. Trends in the Australian dental labour force, 2000 to 2009: Dental labour force collection, 2009. Dental Statistics and Research Series no. 61. Cat. no. DEN 218. Canberra: AIHW. Also available at www.aihw.gov.au.
- 2006: **Balasubramanian M, Teusner D 2011**. Dentists, specialists and allied practitioners in Australia: Dental Labour Force Collection, 2006. Dental statistics and research series no. 53. Cat. no. DEN 202. Canberra: AIHW. Also available at www.aihw.gov.au.

- 2003: **Teusner DN, Chrisopoulos S & Brennan DS** 2007. Geographic distribution of the Australian dental labour force, 2003. Dental statistics and research series no. 37. Cat. no. DEN 168. Canberra: AIHW. Also available at www.aihw.gov.au.

- 2000: **Teusner DN & Spencer AJ** 2003. Dental labour force, Australia 2000. Dental statistics and research series no. 28. AIHW Cat No Den 116. Canberra: AIHW. Also available at www.aihw.gov.au.

Coverage:

- From 2013, data exclude dentists with non-practising registration.

- From 2011, data regarding practising dentists include those dentists in a clinical role, namely, a practitioner who spends the majority of his or her time working in the area of clinical practice.

Break in time series:

- From 2011, data are based on estimates derived from the National Health Workforce Data Set (NHWDS). The data set contains information on the demographic and employment characteristics of dental practitioners (dentists, dental hygienists, dental prosthetists, dental therapists and oral health therapists) registered in Australia. Data are collected via registration forms and a survey instrument administered by the Australian Health Practitioner Regulation Agency, in conjunction with the annual registration renewal process for dental practitioners. Data prior to 2011 were supplied based on data from the now superseded state and territory dental boards and councils. For more information see Appendix A of *Dental workforce 2011* at <http://www.aihw.gov.au/publication-detail/?id=60129542638>. Comparison of 2011 and later data with data prior to 2011 should be made with caution.

- From 2013 the NHWDS is held by the Department of Health and the data has minor differences from the previous AIHW holdings due to the method of imputation for survey non-response and enhanced geocoding methods.

Austria

Source of data:

- ☐ 1970–2005: **Austrian Medical Association.**
- ☐ 2006: **Austrian Dental Association.** Dentists have their own professional association since 2006.
- ☐ Since 2007: **Austrian Dental Association, Austrian Medical Association.**

Reference period: 31st December.

Coverage:

Included are:

- ☐ Domestic and foreign practising dentists who are licensed to practice according to the Austrian legislation and who are registered at the Austrian Dental Association (head count)
- ☐ Domestic and foreign oral and maxillofacial surgeons who are full members of the Austrian Medical Association and therefore licensed to practice according to the Austrian legislation (head count; since 2007)
- ☐ Salaried and self-employed practising dentists in different places of service provision (private practices, hospitals, etc.)
- ☐ Interns and residents under supervision of other dentists
- ☐ Sub-specialties like e.g. odontologists, stomatologists and orthodontologists

Excluded are:

- ☐ Dentists who do not provide services to individual patients (in industry, administration, research, etc.).
- ☐ Dentists working abroad, unemployed, and retired dentists.

Deviation from the definition:

- ☐ Up to and including 2006, oral and maxillofacial surgeons were counted as physicians. Since 2007, they have been assigned to dentists.

Estimation method:

Break in time series:

- ☐ 2007: Since 2007, oral and maxillofacial surgeons are included (enclosed up to and including 2006).

Note: Dental specialists without academic training but with a state license are excluded since 2003; their approbation was granted up to 1975.

Belgium

Source of data: CTI – INAMI.

Reference period: 31st December.

Coverage:

Deviation from the definition: Stomatologists are included in the number of physicians.

Estimation method:

Break in time series:

- Data from 2000: Number of dentists with a minimal volume of patient contacts, excluding non-practising dentists, retired professionals and professionals working abroad.
- 1985-1999 data: Number of dentists who carried out at least one reimbursed medical act during the year.

Canada

Source of data:

- From 2005 to 2009, an estimation of Practising Dentists was based on **Canadian Dental Association membership surveys**.
- From 2010 to 2016, estimations are based on **National Household Survey 2011** and **Census 2016** data from Statistics Canada.

Exclusion: Dentists working in academic setting and public health.

- From 2017 to 2023, estimations are based on the same percentage increase as in dentists licensed to practice.

Chile

Data not available. These data exist only for the public sector (not reported in *OECD Health Statistics*). At the national level (public and private), data are available only for “Dentists licensed to practice”.

Colombia

Data is not available. Data are available for "professionally active" dentists (including dentists in administrative, academic, or research functions who are not providing direct care to patients).

Costa Rica

Data not available.

Czechia

Source of data:

- Up to 2013: **Institute of Health Information and Statistics of the Czech Republic**; Registry of Physicians, Dentists and Pharmacists. National Registry of Reimbursed Health Services
- Since 2014: **Institute of Health Information and Statistics of the Czech Republic**; National Health Information System (Annual report on health personnel).

Reference period: 31st December.

Coverage:

- Until 1999, dentists working in other central organs not included. Since the year 2000, data cover dentists in all health services.
- In 2014, complete data are not available. Estimate is calculated from available data for 2014 and data from 2013.
- Double counting of dentists working in more than one health establishment.
- A new type of statistical survey and improvement of reporting units started in 2016.
- Since 2022 - Only data from health insurance companies. Medical facilities without a contract with an insurance company are not included.

Deviation from the definition:

Estimation method:

Break in time series: 2000, 2014, 2016, 2022

Denmark

Source of data: **The Danish Health Data Authority**, Registered Health Professionals, the Danish Register for Evaluation of Marginalisation, The Danish Civil Registration System.

Reference period: 31st December.

Coverage: 1992-2023

- The term of dentist covers all persons qualified as a dentist with or without authorization to practice independently in the country.

Deviation from the definition:

Estimation method: 2022 change in the data collection

Break in time series:

Estonia

Source of data:

- Annual reports, **National Institute for Health Development**, Department of Health Statistics.

https://statistika.tai.ee/pxweb/en/Andmebaas/Andmebaas_04THressursid_05Tootajad/?tablelist=true.

- 1980-2002 published by **Statistics Estonia**; interns included.

(https://andmed.stat.ee/en/stat/Lepetatud_tabelid_Sotsiaalelu.%20Arhiiv_Tervis.%20%20Arhiiv_tervis_hoiuasutused/TH05).

Reference period:

- 1980-2012: 31st of December.

- Since 2013: November.

Coverage:

Deviation from the definition:

Estimation method:

Break in the series: 1991, 2005 and 2013.

- Until 1990, in addition to health personnel employed in the system of the Ministry of Health, the data include the personnel who worked in health care institutions of the Estonian Railway, Estonian Airway and those belonging to the closed establishments of the Soviet Union.

- The total number of physicians from the year 1991 includes only the data of the Ministry of Health and the Estonian Railway.

- Until 2004, the data of practising dentists were based on their educational qualifications.

- From 2005, the head count distribution is made according to their main occupational activity.

- The data collection methodology was changed in 2013. Aggregated data collection was replaced with data collection on a personal basis. From 2013, the predominant (main) area of practice is based on an occupation with the highest workload.

Finland

Source of data: **THL Health Personnel Statistics; Finnish Institute for Health and Welfare**. The data are based on the Employment Register kept by Statistics Finland.

Reference period: At the end of the calendar year.

Coverage: Practising dentists cover all personnel employed in the health care field under the occupational title of a dentist and who hold a current license to practice as a dentist. Includes personnel between the ages of 18 and 75.

Deviation from the definition:

Estimation method:

Break in time series:

France

Source of data : **Ministère des Solidarités et de la Santé – Direction de la Recherche, des Études, de l'Évaluation et des Statistiques (DREES)**, Sous-Direction de l'Observation de la Santé et de l'Assurance maladie, Bureau des Professions de santé, **RPPS (Répertoire Partagé des Professionnels de Santé)**.

Data were revised in 2023 (years 2011 to 2021).

Reference period: 31st December year N (approximated by data of January 1st year N+1).

Coverage:

- Data refer to metropolitan France and D.R.O.M. (overseas departments and regions).
- Data cover only dentists and stomatologists providing direct care to patients.

Deviation from the definition:

Estimation method:

Break in time series:

Germany

Source of data: **German Dental Association**, Membership statistics of the dental chambers 2023 and **German Medical Association**, Medical practitioner statistics 2023; special calculation by the Federal Statistical Office on base of data from the German Dental Association and the German Medical Association; <http://www.gbe-bund.de> or <http://www.bzaek.de> or <http://www.baek.de>.

Reference period: 31st December.

Coverage:

- Data contain the number of dentists that are actively practising in dental care and provide services directly to patients in dental offices (head-count data).
- The data exclude qualified dentists working abroad or working in administration, research, and industry positions.
- Unemployed and retired dentists and students who have not yet graduated are also not included.
- The number of dentists includes those undergoing further training for specialisation and physicians with specialty “dental, oral and maxillofacial surgery”.

Deviation from the definition:

Estimation method:

Break in time series:

Greece

Data not available. It is not feasible to separate unemployed dentists from the available data. For this reason, only data for dentists licensed to practice are provided.

Hungary

Source of data:

- Up to 1999: **Ministry of Health**.
- Between 2000 and 2001: Data are estimates from the National Institute for Strategic Health Research (ESKI) based on the Operational registration of the **Hungarian Medical Chamber** (MOK in Hungarian) www.mok.hu.
- Between 2002 and 2006: Operational registration of the **Hungarian Medical Chamber** (MOK in Hungarian) www.mok.hu.
- From 2007 until 2014: **Office of Health Care Authorisation and Administrative Procedures** (EEKH in Hungarian) www.eekh.hu.
- From 2015 to 2016, **Health Registration and Training Center** (ENKK in Hungarian) www.enkk.hu.
- From 2017, **National Healthcare Service Center** (ÁEEK in Hungarian) www.enkk.hu, Operational register.
- From 2021, **National Directorate General for Hospitals** (OKFŐ in Hungarian) www.okfo.gov.hu, Operational register.

Reference period: 31st December.

Coverage:

- Practising dentists reported to the National Register of Physicians.
- Included: Specialised and non-specialised dentists, stomatologists, odontologists, orthodontologists.
- Since 2000, the registry of physicians has been prepared by the Hungarian Medical Chamber (MOK). In the first two years of the transition (until year 2002), the Central Statistical Office could not provide data.

Therefore, these data should be treated very cautiously because of the legal and the technical system differences of the two registrations.

Deviation from the definition:

Estimation method:

Break in time series: 2000, 2002, 2005, 2007, 2008, 2015, 2020.

- In 2005, the Hungarian Medical Chamber (MOK) performed data cleaning in the database deleting persons due to retirement, death, employment abroad or leaving the profession.
- From 2007, the Office of Health Authorisation and Administrative Procedures (EEKH) – unlike in the previous years – provided data not on the basis of last acquired specialisation but according to the dominant specialisation practiced during medical work.
- In 2008, the Office of Health Authorisation and Administrative Procedures significantly revised the data quality of the registry with by calling for refinement, according to the 1997. CLIV. Act.
- In 2015, 2020: In case of physicians, dentists and pharmacists there is a five-yearly cyclical decrease in the operational registration because of the expiry of the five yearly renewable operational license. In every fifth year (2000, 2005, 2010, 2015, 2020) there was a dropout in the case of those physicians, dentists and pharmacists, who did not request the renewal of their next five year cycle because they did not fulfil their mandatory further training, or they have been retired, or left to a foreign country, left the healthcare sector, or died.

Iceland

Source of data:

- 2011 and onwards: Icelandic Dentists' Association.
- 2001 - 2010: **The Directorate of Health** - Register of dentists.
- Until 2001: **Icelandic Dentists' Association**.

Reference period: 31st December.

Coverage:

Before 2011:

- Includes: Dentists who are 70 year old and younger with a permanent residence in Iceland (Icelanders or foreign).
- Practising dentists - may refer more to professionally active dentists (but the group of non-practising dentists is small).

As of 2011:

- Number of individuals registered as practising dentists by the Icelandic Dentists' Association.

Deviation from the definition:

Estimation method:

Break in time series: 2011.

Ireland

Source of data: **Dental Council of Ireland** (<http://www.dentalcouncil.ie/>) and **Ireland's Census** (<https://www.cso.ie/en/census/>).

Reference period: Figures as at end of December for Dental Council source. Data as at referenced 2016 (for pre-2022 reference years) or 2022 (from 2022 reference years onwards) Census night.

Coverage:

For data from the Dental Council:

- Figures refer to all persons registered with the Dental Council of Ireland. This may include dentists which are not in activity.
- The following are included; dentists employed in private practice, dentists employed in medical research, dentists employed in public and private hospitals, foreign dentists registered in Ireland and Irish dentists living/working abroad.

For data from Census:

- Data includes all Irish population as part of the Census enumeration. This includes persons having been resident in Ireland for at least 12 months or with the intention of staying for at least 12 months in Ireland.
- Figure excludes temporary stays (e.g., tourists, medical treatment, religious events, etc.) and any other stays amounting less than 12 months as at the established Census night.

Deviation from the definition:

Estimation method:

Let:

- $DP_{C16/22}$ = Population reporting their Occupation as “Dental practitioners” (code: 2215) under the UK Standard Occupational Classification (SOC) in the 2016/2022 Census.

- $DC_{2016/2022}$ = Total number of persons registered with the Dental Council for the year 2016/2022.

Therefore: $DP_{C16/22} / DC_{2016/2022} = P_{C16/22}$

Where $P_{C16/22}$ is the proportion of persons in Census 2016/2022 reporting their occupation to be dental practitioners out of the total registered dentists with the Dental Council in 2016/2022.

So, an estimate for any year N after 2016/2022: $DC_N * P_{C16/22} = PR_N$

Where PR_N is the estimated number of practising dentists for year N based on Dental Council registrations in the same year as a proportion of $P_{C16/22}$.

The proportion will be updated at each available Census, unless better data sources would become available.

- Estimates prior to 2021 not provided.

Break in time series:

Israel

Source of data: The data are based on the Labour Force Survey which is conducted routinely by the **Central Bureau of Statistics** and includes persons who had worked for at least one hour during the week before the survey, for pay, profit or other consideration. Occupation is determined by the type of work performed by the interviewed person at his place of work, without regard to what he studied if his work is not in that field. The classification of occupations is based on the classification of the International Labour Office (ILO): *International Standard Classification of Occupations ISCO 88*.

Coverage:

- The survey population is the permanent population of the State of Israel aged 15 and over, including residents of Israeli localities in the Judea and Samaria region, new immigrants and forced immigrants - from the moment they arrive in Israel, and permanent residents who have been abroad for less than a year continuously. The survey population does not include tourists and temporary residents who have been in Israel for less than a year continuously. The survey sample is a sample of apartments. Approximately 12,000 apartments are sampled each month.

- Data are for all practising dentists.

Estimation method: Moving average of three years (numbers for previous, current and next years) was made in order to diminish the fluctuations in the numbers. For example, the number of practicing dentists in 1996 is an average of 1995-1997. The number for 2011 is an average of 2010-2012. - The sample of practising dentists is relatively small and therefore the data are subject to large variations due to sample errors and wide confidence intervals. Any data analysis should be carried out with caution.

Break in time series:

- From January 2012, the **Central Bureau of Statistics** has made a transition from a quarterly system of measuring labour force characteristics to a new and improved system that better suits the latest international recommendations on employment and unemployment - Monthly Labour Force Survey. Therefore the 2012 (original) data refer to the entire labour force (including the military service) and not to the civilian labour force, as it was before.

- In addition to the transition to a monthly survey, in 2012 a new Standard Industrial Classification of Economic Activities based on ISIC was implemented as well as a new Standard Classification of Occupations based on ISCO-08. The (original) numbers for 2012 are still reported according to the previous classifications, but the (original) numbers for 2013 are based on the new classifications.

Further information:

http://www.cbs.gov.il/publications/labour_survey04/labour_force_survey/answer_question_e_2012.pdf and http://www.cbs.gov.il/publications12/economic_activities11/pdf/e_print.pdf.

Note: The statistical data for Israel are supplied by and under the responsibility of the relevant Israeli authorities. The use of such data by the OECD is without prejudice to the status of the Golan Heights, East Jerusalem and Israeli settlements in the West Bank under the terms of international law.

Italy

Source of data:

- Until 2020: **COGEAPS** <http://wp.cogeaps.it/>.
- Since 2021: **ISTAT** Integrated Data System on Health Personnel.

Reference period: 31st December.

Coverage: Practising dentists.

Deviation from the definition: None.

Estimation method:

- Until 2020: Data on the “Continuing Medical Training program” have been used to estimate the practicing personnel and the professionally active. In Italy health professionals have to be recorded in the professional register to be licensed to practice and to acquire “training credits” while practicing. These credits are registered in the Continuing Training Education database. The estimate of practicing personnel and the professionally active was done by counting, among all registered professionals, those who acquired at least one credit in the last three years.
- Since 2021: Data for the last year are provisional: except for data on professionals employed in the private sector, for other professionals (public sector employees, non-employees in the public and private sector) an estimate is made on the basis of the changes observed in years t-1 and t-2.

Break in time series: 2021: due to changes in data source. The Integrated Data System on Health Personnel provides more accurate data, exhaustive and compliant with the definition. Previous data were estimated and referred to dentists who acquired training credits in the last three years (as a proxy of being practicing/professionally active). The new data source, based on the integration of individual data of professional registers with data from ISTAT’s Registers (on jobs, on economic units, on training) and the Population Census, provides more accurate data on the number of practicing or professionally active dentists. The decrease in the number of dentists in 2021 is due to the over-estimation of previous data source, because of problems of double counting (dentists practicing as physicians). The Integrated Data System on Health Personnel avoids double-counting problems because in the year-t a health professional is counted only in one health profession.

Japan

Source of data: **Ministry of Health, Labour and Welfare**, Statistics of Physicians, Dentists, and Pharmacists (published annually until 1981, and every two years from 1982).

Coverage:

- Data consist of dentists working at medical institutions (including those who work as clinical teaching staff at dental school hospitals), at healthcare facilities for the elderly requiring long-term care, and at integrated facility for medical and long-term care. Data include orthodontists and foreign dentists licensed to practice. Data exclude dentists working in the areas such as industry, research and administration, dentists working abroad, and not-acting dentists.
- Data include dentists-in-training.

Korea

Source of data: **Health Insurance Review & Assessment Service**, Health care resources by provider.

Coverage:

- Includes practitioners working in medical practice only.
- Excludes retired dentists and dentists working abroad.
- Foreigners are included.

Latvia

Source of data:

- Since 2005: **Health Inspectorate of Latvia**; Register of Medical Practitioners and Medical Support Staff.
- 2004 and earlier: **Health Statistics and Medical Technologies State Agency**; Statistical Report No.17 "Report About Medical Staff".

Reference period: 31 December.

Coverage: Including maxillo-facial surgery, dental and oral surgery.

Deviation from the definition:

Estimation method:

Break in time series: 2005: Change in data source.

Lithuania

Source of data: **Health Information Centre of Institute of Hygiene**, data of entire annual survey of health establishments. Report “Health Statistics of Lithuania” available from <https://www.hi.lt/sveikatos-statistikos-leidiniai/#--lietuvos-sveikatos-statistika>. Available on Official Statistics Portal of Statistics Lithuania <http://osp.stat.gov.lt/en>.

Reference period: 31st December.

Coverage:

- The number of practising dentists at the end of the year includes all professionally active dentists excluding those working in administration, health education and research.
- The number of professionally active dentists is collected by annual survey of health care establishments. Response rate for private health care establishments is about 70%. Due to non-response of part of private health care establishments the number of dentists is slightly fluctuating. Due to non-response the number of dentists could increase by approximately 400 persons (or 17%). But such estimation is not done as it is not clear how many of not responded institutions are actually working.

Deviation from the definition:

Estimation method:

Break in series: 1997, when compulsory annual survey of private health establishments had started, and as most of the private health care establishments were dentist institutions, the number of dentists had increased.

Luxembourg

Source of data: **Ministère de la Santé**. Register of doctors and health professionals.

Reference period: 31st December.

Coverage:

Until 1999:

- Includes dentists working in administration and research. Stomatologists included since 1998.
- Retired dentists are not included. However, the end of activity of self-employed dentists is often noted with some time lag.

From 2000:

- Dentists who do not work in direct contact with patients (laboratories, administration, R&D, etc) are excluded, and interns are included.

From 2005 to 2013:

- Stomatologists are still considered as dentists, but it should be noted that stomatologists from Luxembourg are not synonymous with dentist-doctors (they are fully specialised in stomatology).
- Dental surgeons are included.

From 2014:

- Stomatologist, dental and maxillofacial surgeons are excluded.

Deviation from the definition:

Estimation method:

Break in time series: 2000, 2005 and 2014.

Mexico

Source of data: **Ministry of Health**. Bulletin of Health Information and Statistics. National Health System, Vol. 1, “Human and material health resources” 1990 to 2002. For 2003 to 2023, data are taken from the National Health Information System (SINAIS). In the case of the private sector, for 2002 to 2023 the data are taken from the **National Institute of Statistics and Geography** (INEGI). National Survey on Medical units with Inpatient Hospital Services.

Coverage:

- The total number of dentists includes those in direct contact with the patients, those practising odontology, and students (interns).
- The data presented include human resources in the public and private health sectors.
- There may be double counting of dentists because some work in the public and private sectors simultaneously.

Note: There was a decrease in the number of practising dentists in 2018 because some medical dental areas were closed. The decrease in 2020 is explained by the fact that, in addition to the impact of the Covid-19 pandemic, about 280 medical units were no longer functioning due to changes in federal programs and IMSS does not disaggregate information on dentists. Finally, the smaller numbers in 2018, 2020 and 2021 are also caused by the fact that the Mexican Social Security Institute (IMSS) did not report the number of dentists.

Netherlands

Source of data: **Social Statistical Database of Statistics Netherlands, BIG Register** (official register of health care professionals).

Reference period: The last Friday before Christmas.

Coverage:

- From 2017: The sector of employment selection was no longer necessary because of the changed registry requirements. A minimum of working hours in the last 5 years in the professional field related to individual patients is now required.
- Up to 2017: all licensed and dentist working as self-employed or employee, except those working outside Health and social care (Sector Q of NACE) and outside healthcare related branches.

Deviation from the definition:

Estimation method:

Break in time series:

- From 2017 onwards: the license register required re-registration for dentists. The register required dentists to have been practising with a certain minimum amount working hours in the last 5 years in their professional field. The practising requirement has to be directly related to individual patients. Because of this re registration we did not use any selection in the sector of employment. The number of practising dentists significantly increased due to this improvement in meeting the definition of practising dentists.
- In 2015 the register has carried out a check on foreign medical professionals. The result has been an increase in the figure of licensed dentists of around 400.
- Up until 2017, figures have been rounded to 5.
- 2023 : Re-registration effect. Since 2017, dentists and pharmacists are obliged to re-register. The requirement is that they have been practising in the past 5 years.

New Zealand

Source of data: **Ministry of Health and NZ Dental Council Annual Reports.**

Coverage: Data available as of 2020. From 2021 data is as at 31 December of the indicated year.

- More information on methods can be found on the Dental Council website

<https://www.dcnz.org.nz/resources-and-publications/publications/annual-reports/>. All registered oral health practitioners must be registered with the Dental Council under the Health Practitioners Competency Act of 2003. The annual reports produced by the DC show the numbers in each field.

Norway

Source of data: **Statistics Norway**; Statistics on health-care personnel.

- From 2002 onwards: **Statistics Norway**; Register-based statistics on employment of health-care personnel.
- Up to 2001: **National Board of Health.**

Reference period: 3rd week of November.

Coverage:

- Data up to 2001 show FTE; data from 2002 show head count.

Deviation from the definition:

Estimation method:

Break in time series: 2002, 2015.

- 2002. Comparable time-series cannot be delivered for the years preceding 2002.
- As from 2015, the register-based employment statistics will be based on a new data source for employees. Until the end of 2014, the main data source was The Central Register on Employers and Employees (EE register), produced by the Norwegian Labour and Welfare Organisation (NAV). In 2015, this reporting to NAV was coordinated with the reporting of earnings and personnel data to the Tax Administration and Statistics Norway. This common reporting system is called "a-ordningen" (the a-system).

Poland

Source of data: **Ministry of Health, Ministry of Interior, Ministry of National Defence and Statistics Poland.**

- Until 2017: survey of medical personnel based on reports provided by health care units and dentist's practices.
- Since 2019: calculations based on administrative sources, i.e. register of licensed dentists (Polish Chamber of Physicians), files provided by Social Insurance Institution and registers of health care establishments including dentist's private.

Reference period: 31st December.

Coverage:

- Data regarding dentists are based on head counts.
- Dentists are counted in the main workplace.
- Since 2003: Dentists working in the Ministries of National Defence and Interior and Administration are included.
- Since 2004: Dentists working as teaching and administration staff are excluded.
- Since 2005: Dentists working in private medical practice are included.

Deviation from the definition:

Estimation method:

Break in time series:

- 2003, 2004 and 2005. See coverage notes above for description.
- 2019: The new calculation method based on administrative sources provides more robust results. The data until 2018 are underestimated due to high non-response rates in the survey.

Portugal

Data not available. (Data available for all dentists licensed to practice only.)

Slovak Republic

Source of data: **National Health Information Center.**

- Before 2005: Administrative register of health care professionals.

Reference period: 31st December.

Coverage: Stomatologists (dentists practising only in basic field of activity "stomatology") are included.

Deviation from the definition:

Estimation method:

Break in time series: As of 2005, data are only available for professionally active dentists. Suitable data source for providing "practising" concept is under development.

Slovenia

Source of data: **National Institute of Public Health, Slovenia;** National Health Care Providers Database.

Reference period: 31st December.

Coverage: Practising dentists are those working in the health-care sector (primary and secondary care), including public health institutes and the health insurance institute.

Deviation from the definition:

Estimation method:

Break in time series:

Spain

Source of data: **National Statistics Institute (INE). Labour Force Survey** (several issues).

https://www.ine.es/dyngs/INEbase/es/operacion.htm?c=Estadistica_C&cid=1254736176918&menu=ultiDatos&idp=1254735976595.

Reference period: Annual average. Three-year moving averages (e.g., data reported in 2022 is an average of 2021-2023).

Coverage:

- Up to 2010: Practising dentists are included in the number of practising physicians at 3-digit level of the National Occupations Classification (CNO-94), the Spanish equivalent of ISCO-88 in the Economically Active Population Survey.
- From 2011 to 2021 data not available. (Data based on Economically Active Population Survey and referring to CNO-11 codes at 4-digit level (Spanish equivalent of ISCO-08) are not available).
- From 2022 onwards the data are classified according to CNO-11 Spain, code 2151. The CNO-11 code 2151 is the Spanish equivalent of ISCO-08 code 2261 (dentists).
- The 'Practising' data correspond to dentists whose activity (NACE) is within the health sector. The number of practising dentists was obtained by calculating the number of dentists employed in the health sector according to NACE rev.2 (chapter Q) since 2021
- Data analysis over time should be carried out with caution. Data are obtained from a survey and fluctuations in the data can occur for a number of reasons, one of them being the sampling errors. These variations can lead to false assumptions about trends. We advise users of time series data to carefully explore the relevant issues before drawing any conclusions about the reasons for year-on-year changes.

Deviation from the definition:

Estimation method: In 2024, data series from 2022 onwards have been updated with Spanish population figures imported from Census 2021 and recalculated by using three-year moving averages in order to reduce the large year-to-year fluctuations in data derived from the LFS. Data are calculated by using three-year moving averages in order to reduce the large year-to-year fluctuations in data derived from the LFS: the number reported in 2022 is an average of 2021-2023.

Break in time series:

Sweden

Source of data: **National Board of Health and Welfare, LOVA-register.**

Reference period: 1st November.

Coverage:

- Sweden uses NACE-codes to identify practising dentists (i.e., active within the health-care system) and therefore cannot exclude dentists who are seeing patients from those who do not within the health-care system.
- Full coverage for licensed practising dentists.

Switzerland

Source of data: **Swiss Dental Association (SSO), Bern.**

Reference period: Data as of December 31.

Coverage: Dentists with private practices, who contract with social insurance; it can be considered as appropriate full coverage.

Deviation from the definition:

Estimation method:

Break in time series: 2019. In-depth reassessment of the data, notably to correct for professionals who were to be left out of the sample (retired, deceased).

Türkiye

Data not available. Data are available for "professionally active" dentists (including dentists in administrative, academic or research functions who are not providing direct care to patients).

United Kingdom

Source of data:

- **England:**

- * Primary Care Dentists - NHS Business Services Authority. (Data as at 31 March each year).

- * Hospital and Community Health Services (HCHS) Dentists - Up to 2008: Medical & Dental Workforce Census; since 2009: NHS Hospital & Community Health Service (HCHS) workforce statistics. (Data as at 30 September each year). The data from 2009 are headcount.

- **Northern Ireland:** Hospital and Community dentists data from Department of Health, , and General Dental Practitioner data from the Business Services Organisation;

- **Scotland:** GDP data are sourced from the Management Information and Dental Accounting System (MIDAS), and data for HCHS dentists are sourced from the medical and dental workforce census (MEDMAN) and the Scottish Workforce Information Standard System. Dentist Table:

<https://turasdata.nes.nhs.scot/workforce-official-statistics/nhsscotland-workforce/publications/01-december-2020/data-tables/>.

- **Wales:** Welsh Government: Staff directly employed by the NHS | GOV.WALES

(<https://www.gov.wales/staff-directly-employed-nhs>). Dental Services, NHS Business Services Authority.

(<https://www.gov.wales/staff-directly-employed-nhs>)

Reference Period:

- **England & Wales:** data are a combination of hospital dentists and primary care (high street) dentists. The hospital dentists are as at 30 September, while the primary care dentists are those providing NHS services in the financial year April – March.

- **Scotland:** data are as at 30th September each year.

- **Northern Ireland:** hospital dentists are counted in September and general dental practitioners are counted in October.

- **Wales:** data for 2018 onwards at 31 December.

Coverage:

- Does not include private sector.

- Data for Financial years i.e. 01-04-07 to 31-03-08 will be presented for 2007.

- Data are a combination of General Dental Practitioners (GDPs) and Hospital and Community Health Services (HCHS) dentists.

- Due to the introduction of the new dental contractual arrangements in England and Wales (01-04-06) and a revised methodology for counting dentists, data for England and Wales are only provided for 2007 onwards as these data are not comparable with previous years. For this reason, previous years for the UK have not been submitted.

- The revised methodology covers GDPs in England and Wales and counts the number of dentists with NHS activity recorded via an FP17 claim form each year ending 31st March.

- **England:** Primary Care dental data refer to dental performers who had performed and claimed for NHS activity in each year. Data on Hospital and Community Health Services (HCHS) Dentists were previously rolecount for 2009-2014 - they are now headcount.

- **Scotland:** Includes all General Dentals Service dentists (Salaried and Non-salaried principals, assistants and vocational trainees) Dental Hospital, Community and Public Health services (HCHS) staff of the NHS.

- **Northern Ireland:** General Dental Practitioner data include principal, associate dentists and salaried dentists - assistants and trainees are excluded prior to 2011. Figures from 2011 onwards have been revised and now include principals, associates, salaries, plus assistants and vocational trainees (as at April for these years).

Deviation from the definition:

- There will be dentists in the UK working as both GDPs and HCHS dentists. These are only counted once in Scotland, however, they are unable to be separated in England. In Wales and Northern Ireland some double counting may also occur.

- Dentists may also be counted twice if they have contracts in more than one country of the UK.

- Dentists in Scotland may be counted more than once if they work in different health boards.

Break in time series: 2009.

- **England:** The break in the time series in 2009 relates to a change in the collection methodology: HCHS data changed from an annual census collection to monthly workforce statistics from the Electronic Staff Record (ESR).
 - **England:** Up to 2008, data are based on rolecount; since 2009, they are based on headcount.
- Note: Since the data do not include the private sector, the decrease in NHS dentists is likely to be explained by an almost equal increase in the number of private dentists.
- **Northern Ireland:** A new method for calculating headcount has been introduced for 2023 onwards.

United States

Data not available. Data are available for "professionally active" dentists (including dentists in administrative, academic or research functions who are not providing direct care to patients).

NON-OECD ECONOMIES

Bulgaria

Source of data: **National Statistical Institute**, Exhaustive annual survey.

Reference period: 31st December.

Coverage:

All dentists and maxillo-facial surgeons who worked on a basic labour contract in outpatient and inpatient establishments, as well as those who practice in other health establishments - centres for emergency medical care, centres for transfusion haematology, homes for medical and social care for children, Hygiene-epidemiological inspections, and others.

Deviation from the definition:

Estimation method:

Break in time series:

2000: On 01.07.2000 Bulgaria started its Healthcare Reform and financing of curative medical and dental care by the National Health Insurance Fund came into force. Recovery of the private practice gave an opportunity to dentists to practice in individual and group practices for dental care.

2010: In 2010, there is a break in time series in respect to:

- the territorial distribution of physicians and dentists, working in practices under a contract with the NHIF. Medical practitioners working in practices that serve more than one municipality or district are included in the total number but not distributed by municipalities or by district.
- physicians working in specialized practices under a contract with the NHIF are allocated to the specialty they are practiced. Those who practice more than one specialty are included in the total but not allocated by specialty.

Croatia

Source of data: Croatian Institute of Public Health, National Register of Health Care Providers.

Reference period: Status on December 31st.

Coverage: Private dentists and stomatologists have been included since 1993 and maxillofacial surgeons since 2009.

Deviation from the definition:

Estimation method:

Break in time series: 1993 and 2009.

Cyprus

Source of data: **Statistical Service of Cyprus**, Public sector administrative sources & Pancyprrian Dental Association for the Private Sector. Validity of the source: For the years 1985, 1987, 1995 and 2000 figures were obtained from the Census of Doctors, Dentists and Clinics.

Reference period: 31st December.

Coverage:

Deviation from the definition: The maxillofacial surgeons were not included in the number of practising dentists up to 2013, since they were considered as physicians. From 2014 onwards, the maxillofacial surgeons are considered as dentists.

Estimation method: For years 2009 and 2010, the actual number of practising dentists on the 31st of December of the reference year was not available from the Pancyprian Dental Association, due to some changes in their IT system. Hence, they provided CYSTAT with estimated figures according to the numbers available on February of the next year. For other years, no estimation, actual data used.

Break in time series: 2014: Up to 2013 the maxillofacial surgeons were not included in the number of practising dentists, since they were considered as physicians.

Romania

Source of data: **National Institute of Statistics**, The activity of the sanitary and health care network – annual survey performed by NIS.

Reference period: data as of 31st December.

Coverage:

From 1970 to 1998, data refer only to the public sector.

From 1999 the data cover all sanitary dentists from public and private sector.

- Dentists (ISCO/COR 2222) are defined as the persons who have completed studies in stomatology at university level and who are licensed to practice. Dentists' tasks include: making diagnosis, giving necessary dental treatment, giving surgical, medical, and other forms of treatment for different types of dental and oral diseases and disorders, establish curative and preventive dental measurement, relished reports and participate to scientific communication in oral health and dental care.

- The dentists who work in education field as teachers and dentists from health insurance field or that work in other institutions involved in the administration of the healthcare system (e.g., public health institutes) are not included as practising dentists.

- Excluding: students, unemployed dentists in health field, retired dentists that are not still working, and dentists working abroad, dentists working in sales field even if they work in medical sales (ex. medical drugs).

Until 2007, dentists working in administration, research and in other posts that exclude direct contact with patients could not be totally excluded.

Deviation from the definition: Between 1999 and 2006, dentists working in administration, research and in other posts that exclude direct contact with patients could not be totally excluded. Beginning with 2007 non-practicing dentists could be identified and in 2010 a distinction was added to the health care questionnaire in order to identify active medical personnel. Until 2019, data doesn't include oral and maxillofacial surgeons. In 2024 data series from 2019 were revised due to revisions of number of oral and maxillofacial surgeons.

Estimation method:

Break in time series:

- 2007 – non-practicing dentists could be identified and were excluded from the number of practicing dentists.

- 2019 - Beginning with 2019, oral and maxillofacial surgeons were included in the number of practicing dentists.