

MUSCULOSKELETAL HEALTH KEY STATISTICS

Poland

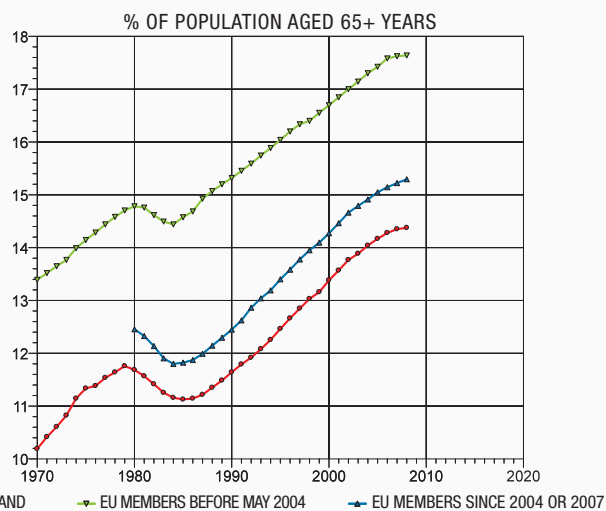


May 2011

Demographic information

Population size: **38,186,860**

% of population over 65: **13.5**



Source: WHO Health for All Database 2010

Societal and economic information

GDP (Per Capita in US\$ PPP): **\$18,800 (\$30,388)¹**

Income / Wealth inequality (Gini coefficient): **37.2 (30.4)**

Unemployment levels (% of labour force): **13 (9.5)**

Population health

Life expectancy at birth: **Male 71.3 Female 80 (M 74.5, F 81.1)**

Life expectancy at age 65: **Male 14.7 Female 19.0 (M 16.0, F 19.7)**

% of adults 20yrs+ obese: **Male 16 Female 20 (M 15, F 16)**

% regular daily smokers 15yrs+: **29 (26)**

% of those who rarely or never do any exercise: **25 (24)**

Musculoskeletal health

Prevalence clinically confirmed rheumatoid arthritis: **0.6%**

Prevalence self-reported osteoarthritis: **20%**

Prevalence self reported back pain: **44%**

% of workers reporting backache attributed to work: **45.8%**

Age-standardized Disability Adjusted Life Years (DALYs) MSC per 100,000: **647 (473)**

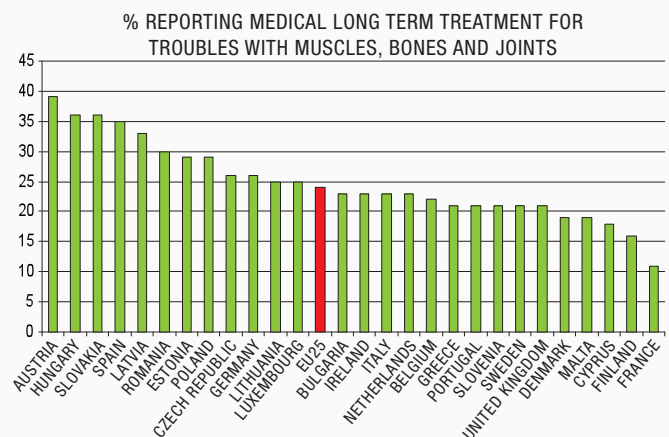
Age-standardized DALYs RA per 100,000: **140 (82)**

Age-standardized DALYs OA per 100,000: **415 (254)**

Potential years of life lost due to diseases of musculoskeletal system: **8 (Average 17 EUMS² 9)**

Deaths from diseases of musculoskeletal system per 100,000 population (standardised rates): **1.1 (Average 17 EUMS 2.6)**

Age adjusted mortality rates due to fall injuries per 100,000 among the elderly: **59.3 (51.56)**



Source Eurobarometer 2007

Health and social care system

- The healthcare system guarantees to insured persons: free access to health services and free choice of a service provider.
- Insured persons are entitled to healthcare benefits aimed at the preservation of health, prevention of diseases and injuries, early detection of diseases, treatment, nursing care, prevention and limiting of disability.
- In emergency situations, health services are provided without the required referral. In the event that the regulations do not provide for an insured person's participation in costs, health services are provided free of charge. Payment is made for services which are well defined as being not within the health insurance entitlement. These services include: occupational medicine services, health services in health resort hospitals and sanatoriums not connected directly with the reason for which the insured person was originally referred to a spa treatment, a stay in health resort medical care institutions – the insured person bears the cost of travelling to and from a sanatorium, some of the accommodation and board costs in the sanatorium.

¹ Figures in bracket are EU average unless otherwise stated

² EUMS - European Member States

- The provision of orthopaedic items and auxiliary means such as prostheses, spectacles, etc., is limited in quantity and part of the cost must be paid.
- Free medicine is available to an insured person who is taken into a hospital or another healthcare institution. In order to buy medicine at a discount, a prescription issued by a doctor accredited to the National Health Fund is required.
- Health insurance contributions are collected by employers, social insurance institutions, retirement/pension institutions and social security centres, schools and universities, etc. (contribution payers).
- Most medical institutions are publicly owned. It is very popular among Polish citizens to pay public insurance for hospital visits but for GP, dentist and other basic medical services, use private medical sector and pay full fee.
- Under the Polish social security scheme employees and employers contribute 9.76% of earnings and payroll respectively to the old-age pension system, and 6.5% of gross salary and payroll respectively to the survivors and disability pension schemes. Employees contribute 10.7% of earning to the sickness and maternity benefits funds, which are also subsidized by the Government.
- During the first 33 days of sickness-related inability to work in a calendar year, the employer is obliged to pay the employee 80 % of the salary (100 % in some cases, e.g. sickness during pregnancy). Afterwards, sickness allowance is financed by the Social Security Institution (and generally also amounts to 80 % of the base of calculation).

Expenditure

Total national expenditure on health (% of GDP): **4.6 (8.4)**

Public expenditure on health (% of total health expenditure): **72.2 (73.5)**

Public social expenditure (%GDP): **21.0 (Average 15 EUMS 20.5)**

Expenditure on in-patient care per capita, US\$ PPP: **388 (Average 19 EUMS 928)**

Expenditure on pharmaceuticals per capita, US\$ PPP: **274 (Average 21 EUMS 463)**

Provision of health services for MSC

What conditions are predominantly managed in primary care?

Osteoarthritis, Back pain

What conditions are predominantly managed by rheumatologists?

RA, SA, OA

What conditions are predominantly managed by orthopaedics (non-operative)?

RA, SA, OA, osteoporosis

Are rheumatology services provided in the context of an integrated multiprofessional, multidisciplinary team?

No

Are physiotherapists independent practitioners?

No, legally physiotherapy must be provided under the surveillance of a medical doctor

Is there access to occupational therapists?

Yes

Are there specialist nurses and what is their role?

Yes, they are employed exclusively by hospitals

Can patients be admitted for medical treatment of their musculo skeletal condition?

Yes

Can patients be admitted for rehabilitation of their musculoskeletal condition or can intensive rehabilitation be provided as an outpatient?

Yes but no longer than 2 weeks per year

Health care for musculoskeletal conditions

No. of practising Rheumatology physicians per 100,000: **2.3**

No. of Orthopaedic specialists: **No data available**

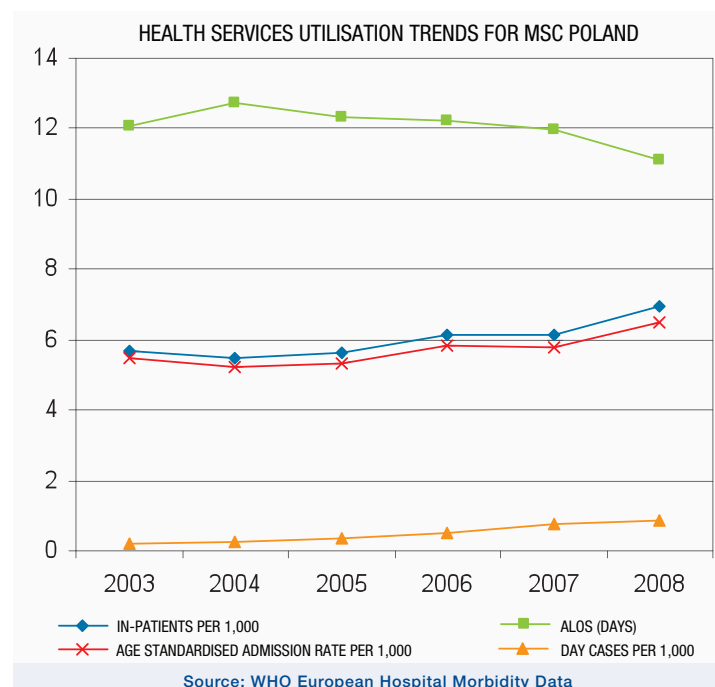
No. of practising Occupational therapists: **No data available**

No. of practising physiotherapists: **30,000**

Hip replacement procedures per 100,000 population

(in-patient 2007): **33.8 (Average 16 EUMS 174.7)**

Knee replacement procedures per 100,000 population (in-patient 2005): **data unavailable (Average 13 EUMS 265.5)**



Patient groups

Please see EUMSC website (below) for details of Polish patient organisations.

Sources

For information on data sources and details of measures please go to the EUMUSC website: www.eumusc.net

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Disclaimer

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