

Numbers of Dermatologists and Some Trends in Dermatology in Finland

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The authors have made an inventory of the status of dermatologists in Finland and their conclusions are largely optimistic. Despite lower income this field is attractive due to better working conditions. However, the number seems to slightly decrease since the retiring dermatologists exceed the number of graduating dermatologists.

Total number of dermatologists and their positions

Finland has five university clinics and 15 central hospitals with dermatological units. The central hospitals typically have 1–3 specialist positions, while the university clinics have 6–16 specialists and 3–9 resident positions. The total number of working-age Finnish specialists in all medical fields is 13,739. The number of doctors with a specialty in dermatology is 270. Of this total, 181 are of working age, and of them, 132 are women. Eighty-one dermatologists belong to the Private Dermatologist Section in the Finnish Dermatological Society (PRIDE), while 78 of them are at present working full-time in private clinics. Thus, close to 100 dermatologists have their main occupation in central hospitals and university clinics. In addition to their hospital work, many specialists also undertake private practice.

Specializing in dermatology

There are approximately 23 resident positions, but the number of residents is somewhat greater, based on the need to employ acting doctors during long periods of maternity leave, research breaks and holidays. Dermatology remains a popular field, and resident positions in university clinics tend to attract more applicants than there are positions available. We are lucky, and should be grateful, that the influx to dermatology occurs regardless of the lower income available compared with resident salaries in other fields. The lower total income is due to the daytime working hours of residents in dermatology, while a large proportion of the income in more acute fields comes from working at night or during weekends. However, predominantly daytime work, the reasonably good possibility of starting private practice, and good research opportunities in both biomedical and clinical sciences are likely to play central roles in attracting young physicians to start dermatology training. As a total of 4–7 residents achieve their specialty each year, approximately 30 will achieve this position during the coming 5 years.

Retirement

Approximately eight senior dermatologists retire each year, thus a total of 40 will be retiring in the next 5 years. The num-

bers for both retiring and graduating dermatologists are small and vary from year to year. It is common that specialists who retire from the hospitals continue their private practice. There may also be a trend whereby senior dermatologists retire from their hospital positions slightly prior to their official retirement dates. Last year, one of the largest private clinics made a decision that doctors aged 70 years or older would no longer be allowed to run their practice. Although it is not possible to give exact numbers, there appears to be a slightly higher level of retirement than graduation. This may reflect the fact that the average age of Finnish dermatologists (51.1 years in 2006) is somewhat higher than in other specialty fields in Finland.

Private sector

The status of practising dermatology varies from one part of the country to another. Cities and towns with university clinics nearby tend to have more dermatologists competing for patients, while there are large areas, especially in the northern parts of the country, where there are almost no private dermatologists. However, the density of dermatologists per person (hospital + private), does not differ significantly between hospital districts.

Funding of dermatology

During the past 10–15 years hospital units have been forced to close or to reduce the size of inpatient units. This trend began during the recession of 1990s, but has continued through better economic times. Thus, outpatient wards have become more dominant. Despite this, the number of patients treated has increased throughout the country during recent years. In addition, the number of referrals from healthcare centres and general practitioners, as well as from occupational healthcare services, to hospital clinics has increased.

In the academic setting, dermatologists compete with all specialties for the same grants from hospitals, Academy of Finland and private foundations. Since the late 1990s there have been many economically strong years, but the situation is now changing along with the general financial trends. The

outcome of grant applications should be based on the scientific quality of the research and, in this setting, the top dermatologists have managed to maintain their funding. To date, there are several well-funded research groups run by dermatologists in different parts of the country. The Finnish Dermatological Society has been able to fund mainly thesis work, for example this year 30,000 € was distributed as grants. The main problem for dermatologists is how to combine scientific and clinical careers during residency and after graduation.

Salaries

There appears to be a flow of dermatologists from hospitals to private practice, whereas movement in the other direction is negligible. This may be due to the higher salaries, but the more flexible working hours in the private clinics compared

with the strict working hours in hospital may also be a factor. In addition, working part-time (e.g. 50%) has become more popular in hospitals during recent years. The salaries of hospital dermatologists are lower than for most specialties, probably because dermatologists are not on call.

Conclusion

The future of dermatology looks largely positive. The field is attractive to young doctors despite the lower incomes than for many other specialties. The relationship between retiring dermatologists and graduating specialists appears to be slightly decreasing the total number of dermatologists. To maintain the scientific outcome, more research grants or opportunities for research sabbaticals should be made available to specialists.

Research Awards for Norwegian Dermatologists

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Two dermatologists were awarded prizes for their research at the annual meeting of the Norwegian Dermatological Society.

Although Norwegian academic dermatology is struggling, it is important to point out that many dermatologists in Norway are contributing to dermatological science by performing and publishing scientific studies.

For many years, the Norwegian Dermatological Society has presented the **Schering-Plough award** for excellent dermatological research by a Norwegian dermatologist or (in some cases) a non-dermatologist. The prize, sponsored by Schering-Plough, is presently 60,000 NOK. This year, the recipient was *Marit Saunes*, of the Department of Dermatology, St Olav's Hospital, Trondheim, for her epidemiological studies on skin disease.

A recently established prize for **best original research article** in the previous year was presented for the first time. Articles published in both 2007 and 2008 were considered. The prize winner was *Anne-Lene Krogstad*, of the Department of Derma-

tology, Rikshospitalet in Oslo, being the last author and tutor for an article by Osmanovic and co-workers at Sahlgrenska University Hospital in Göteborg (1).

Jon Anders Halvorsen (Oslo), Sheila Fevang (Stavanger) and Benedikte Geisner (Bergen) were nominated for another newly established prize for an original research article by a young dermatologist. The prize, which is sponsored by ACO, Galderma, and Photocure, will be presented at a meeting for young dermatologists later this year.

Reference

1. Osmancevic A, Landin-Wilhelmsen K, Larkö O, Mellström D, Wennerberg AM, Hulthén L, Krogstad AL. Risk factors for osteoporosis and bone status in postmenopausal women with psoriasis treated with UVB therapy. *Acta Derm Venereol* 2008; 88: 240–246.