

Statistics of Physicians, Dentists and Pharmacists, 2020

【Digest of Summary Report】

○Number of physicians, dentists and pharmacists

All the notification numbers have increased from 2018 (“the previous survey”).

Physicians	339,623 (12,413, 3.8% increase from the previous survey)
Dentists	107,443 (2,535, 2.4% increase from the previous survey)
Pharmacists	321,982 (10,693, 3.4% increase from the previous survey)

○The proportion of females in physicians, dentists, and pharmacists

Physicians	77,546 (22.8%) (5,788, 8.1% increase from the previous survey)
Dentists	26,913 (25.0%) (1,616, 6.4% increase from the previous survey)
Pharmacists	197,740 (61.4%) (6,996, 3.7% increase from the previous survey)

○The number of physicians whose main specialty is “Pediatrics,” “Obstetrics and gynecology,” or “Surgery (*).”

Pediatrics	17,997 (676, 3.9% increase from the previous survey)
Obstetrics and gynecology	11,678 (346, 3.1% increase from the previous survey)
Surgery (*)	27,946 (113, 0.4% increase from the previous survey)

* “Surgery” includes General surgery, Respiratory surgery, Cardiovascular surgery, Breast surgery, Broncho-esophagological surgery, Gastroenterological surgery, Proctological surgery, and Pediatric surgery.

○The number of physicians practicing in health care facilities per 100,000 population by prefecture.

The number for all Japan was 256.6 (9.9 increase from the previous survey).

The largest numbers were Tokushima (338.4), Kyoto (332.6), and Kochi (322.0).

The smallest numbers were Saitama (177.8), Ibaraki (193.8), and Niigata (204.3).

Please click [here](#) for the details (Japanese only)

Outline of statistics

1 Objective

These statistics are gathered to ascertain the distribution of physicians, dentists, and pharmacists by sex, age, type of practice, place of work, and clinical specialty (excluding pharmacists) and to obtain basic data for health and welfare policy making.

2 Subjects of tabulation

The subjects of the survey were physicians provided with notifications in accordance with Article 6, paragraph 3 of the Medical Practitioners Act, dentists provided with notifications in accordance with Article 6, paragraph 3 of the Dental Practitioners Act, and pharmacists provided with notifications in accordance with Article 9 of the Pharmacists Act, all of whom have places of residence in Japan.

3 Tabulation items

- | | |
|--------------------------|--|
| (1) Address | (6) Address of place of work |
| (2) Sex | (7) Chief line of practice (excluding pharmacists) |
| (3) Date of birth | (8) Clinical specialty (excluding pharmacists) |
| (4) Date of registration | (9) Names of the certifications that can be advertised regarding the specialties of physicians and dentists (excluding pharmacists) etc. |
| (5) Type of practice | |

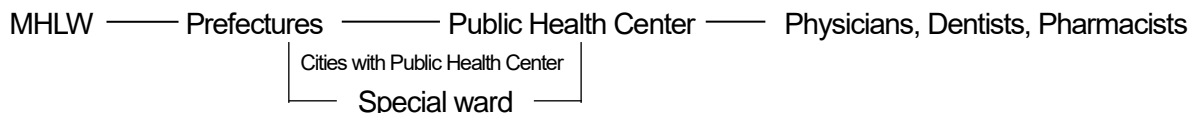
4 Date of the notification

As of 31 December, 2020

5 Route of the notification, etc.

(1) Physicians, dentists, and pharmacists who are obligated to provide notification submit the notification to the Minister of Health, Labour and Welfare, via public health centers, prefectures, etc.

(2) Route of the notification



6 Tabulation of results

Director-General for Statistics, Information Policy and Industrial Relations at MHLW tabulated the results.

7 Definitions

(1) Hospitals

A place where physicians or dentists provide health care and dental care, with inpatient facilities for 20 or more patients.

(2) Medical educational institutions

A university or other institution under the School Education Act where education of medicine or dentistry is provided.

(3) Clinics

A place where physicians or dentists provide health care and dental care, without inpatient facilities or with inpatient facilities for 19 or fewer patients.

(4) Health care facilities for the elderly requiring long-term care

A facility approved by the prefectural governors under the Long-Term Care Insurance Act where they provide their residents requiring long-term care with nursing care and functional training under medical and nursing management, other medical treatment, and support for daily living, based on the facility's service plan.

(5) Rehabilitation facilities for the elderly

A facility approved by the prefectural governors under the Long-Term Care Insurance Act where they provide persons requiring long-term nursing care with nursing care and functional training under long-term care and medical and nursing management, other medical treatment, and support for daily living, based on the facility's service plan.

8 Notes

(1) Symbols used in the table

Quantity zero	—
Data not available or applicable	...
Item/Category not applicable	•
When the result of rounding by ratio, etc., does not reach 1 of the least significant digit to be shown.	0.0
Decreased number or percentage	△

(2) Percentages presented are rounded and the sums of the items do not always make up the totals.

(3) Rates per 100,000 population were calculated based on the “Result with Imputation on 2020 Population Census (Reference Table) (Ministry of Internal Affairs and Communications)”.

(4) “Names of the certifications that can be advertised regarding the specialties of physicians and dentists” refers to those that can be advertised based on Article 1, item 2 of the “Matters can be advertised with respect to medical, dental or midwife services or hospital, clinic, or maternity section pursuant to the provisions of Article 6-5 paragraph (1) and Article 6-7 paragraph (1) of the Medical Care Act” (Notification No. 108 of 2007 by the Ministry of Health, Labour and Welfare); in other words, the name of a qualification recognized by an organization that has been notified to the Minister of Health, Labour and Welfare as meeting the criteria set forth in the said notification.

This is called “specialty qualification” in this Summary Report.

(5) Clinical specialties used in these Statistics are those whose advisement is allowed in the Medical Care Act.

Clinical specialties proclaimed by medical institutions were previously stipulated in the Ordinance for Enhancement of the Medical Care Act by limitedly enumerating specific names. On 1st April, 2008, however, from the viewpoint of encouraging people to select the appropriate medical institution and see a doctor, the system was changed to a flexible one that allows using names of specific characteristics, such as body parts and patient diseases, as clinical specialties. Thus, their yearly trends are not simply compared.

(Reference: 31 March, 2008 Medical Policy No. 0331042, Notice of the Director General of Medical Policy Bureau, “Review of clinical specialties that can be advertised.”

URL(<https://www.mhlw.go.jp/topics/bukyoku/isei/kokokukisei/dl/koukokukanou.pdf>)