



General data

POPULATION, 2023
9,592,186

PHYSICIANS / 1,000 INH, 2021
3.29

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
High income

GDP PER CAPITA (US\$), 2023
22,141

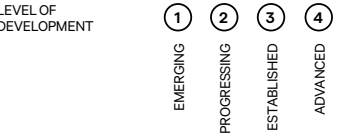
HEALTH EXPENDITURE (% GDP), 2021
7.37

UNIVERSAL HEALTH COVERAGE, 2021
79



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

- ④ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- ③ POLICIES
- ② RESEARCH
- ① USE OF ESSENTIAL MEDICINES
- ⑥ EDUCATION AND TRAINING
- ⑤ PROVISION OF PC



Consultants: Csilla Busa; Ágnes Csikós, Katalin Hegedus and Miklós Lukács.

National Association: Hungarian Hospice Palliative Association (HHPA).

Data collected: October 2024–March 2025

Report validated by consultants: Yes

Endorsed by National PC Association: Yes

Edition: Edited by Atlantes Research Team (University of Navarra, Spain).

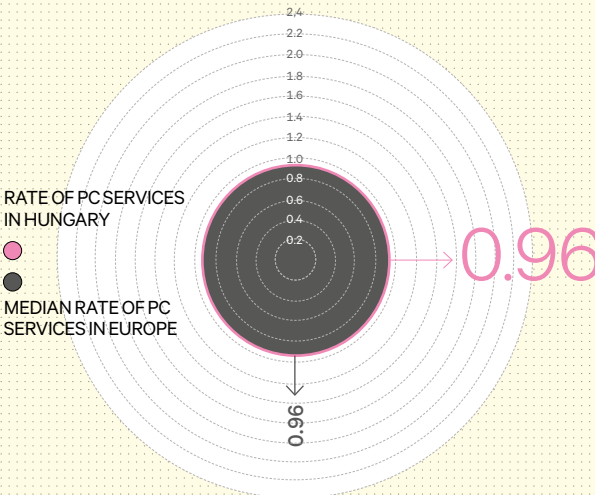
Hungary

F Provision of PC (Specialised Services)

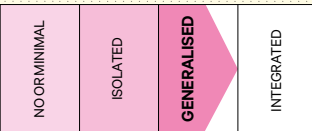
Total number of Specialised PC services
92

Rate of PC services per 100,000 inhabitants
0.96

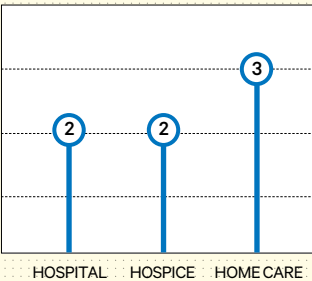
Hungary in the context of European region



Geographic distribution and integration of PC services



Level of development of different types of PC services



Paediatric PC Services

GEOGRAPHIC DISTRIBUTION AND INTEGRATION
2

TOTAL NUMBER
3

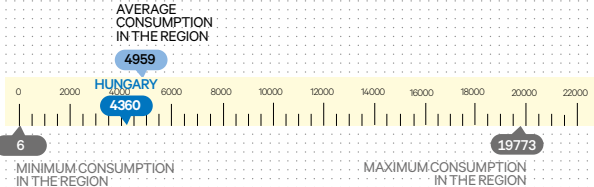


Hungary

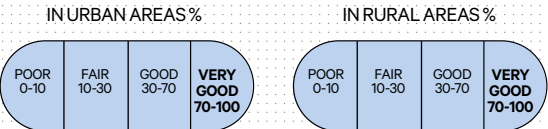
D Use of essential medicines

Opioids consumption (excluding methadone)
4,360
S-DDD/MILL INHABITANTS/DAY

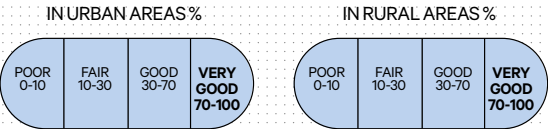
Hungary in the context of European region



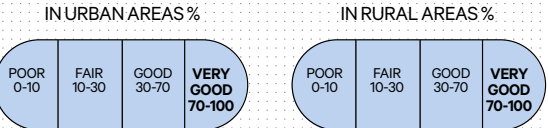
Overall availability of essential medicines for pain and PC at the primary level



General availability of immediate-release oral morphine at the primary level



General availability of different opioids and in different formulations at the primary level



C Research

PC-related research articles
2

Inclusion of PC topics in National Research Calls
1

Existence of PC congresses or scientific meetings
4

E Education & Training

Medical schools with mandatory PC teaching
0/4

Nursing schools with mandatory PC teaching
91/91

PC Full Professors
0

Recognition of PC specialty
4

B Policies

National PC plan or strategy
2

Responsible authority for PC in the Ministry of Health
3





Inclusion of PC in the basic health package at the primary care level
4

A Empowerment of people and communities





Groups promoting the rights of PC patients
3

Advanced care planning-related policies
3

EU Hungary

Ind1 Existence of groups dedicated to promoting the rights of patients in need of PC, their care-givers, and disease survivors.	 Existence of group(s) that cover palliative care in a more integrated way or over a wider range of disease/programme areas.	In Hungary, there exist several organisations: <i>Rákbetegek Országos Szervezete</i> (National Organisation of Cancer Patients), <i>Magyar Rákellenes Liga</i> (Hungarian League Against Cancer), <i>Társaság a Szabadságjogokért</i> (Society for Civil Liberties) and the <i>Magyar Páciensek Kamarája</i> (Hungarian Chamber of Patients). There exists also a national palliative care association, the Hungarian Hospice Palliative Care Association, founded in 1995, and the <i>Méltóságért Alapítvány</i> (For Dignity Foundation) (founded in 2023).
Ind2 Is there a national policy or guideline on advance directives or advance care planning?	 There is/are national policies or guidelines on living wills and/or on advanced directives.	Advance Care Planning is mentioned in the National Palliative Care Guideline and present in the Healthcare Law.
Ind3 3.1. There is a current national PC plan, programme, policy, or strategy. 3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.	 Developed over 5 years ago.  A national palliative care plan is in preparation.	Although palliative care was included in the Hungarian National Cancer Control Programme, 2006, this has not yet been updated nor a stand-alone national strategy for palliative care developed. However, there exists a National Palliative Care Guideline, Ministry of Health's professional guideline on hospice and palliative care for terminally ill adult and paediatric cancer patients, prepared by the Hungarian Hospice-Palliative Association in consultation with the Hungarian College of Nursing and Dietetics.

EU Hungary

3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.	 Not known or does not exist.	
Ind4 PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.	 Palliative care is included in the list of health services provided at the primary care level in the General Health Law.	It is included in list of health services to be provided as per the National Healthcare Law and in the National Health Insurance Fund of Hungary.
Ind5 5.1. Is there a national authority for palliative care within the government or the Ministry of Health? 5.2. The national authority has concrete functions, budget and staff.	 There is a coordinating entity but has an incomplete structure (lack of scientific or technical section).  There are concrete functions, staff and budget.	The National Public Health Centre and the Medical Professional College for palliative care are responsible for palliative care.

EU

Hungary



<div>Ind6</div> <div>Existence of congresses or scientific meetings at the national level specifically related to PC.</div>	<div><div><div></div><div></div><div></div><div>4</div></div></div> <div>At least one national conference specifically dedicated to palliative care every year.</div>	<div>National Palliative care Congresses are held as well as other activities, many of which can be found at the Hungarian Association for Palliative Care website; last symposium was held in Pécs, October 2024, and it is held annually, apparently in October.</div>
<div>Ind7:1</div> <div>Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.</div>	<div><div><div></div><div>2</div><div></div><div></div></div></div> <div>Reflects a limited number of articles published.</div>	<div>Besides an increasing number of articles published between 2019-2024, Hungarian researchers participate in European research consortiums and have produced a series of research articles.</div>
<div>Ind7:2</div> <div>Inclusion of PC topics in national research calls.</div>	<div><div><div>1</div><div></div><div></div><div></div></div></div> <div>There are no national research calls at all.</div>	<div>There are no national research calls at all.</div>
<div>Ind8</div> <div>Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.</div>	<div><div>4,360</div><div>S-DDD PER MILLION INHAB /DAY</div></div>	<div><div>Average consumption of opioids, in defined daily doses (S-DDD) for statistical purposes 2020–2022.</div><div><div>COUNTRY VS REGION</div><div><div>AVERAGE CONSUMPTION IN THE REGION</div><div>4959</div><div>HUNGARY</div><div>4360</div><div>0200040006000800010000120001400016000180002000022000</div><div>619773</div><div>MINIMUM CONSUMPTION IN THE REGION</div><div>MAXIMUM CONSUMPTION IN THE REGION</div></div></div></div>

EU






Hungary

<div>Ind9</div> <div>9.1. Percentage of health facilities at the primary care level in Urban areas that have pain and PC medications as defined in the WHO Model List of Essential Medicines.</div> <div>9.2. Percentage of health facilities at the primary care level in rural areas that have pain and PC medications as defined in the WHO Model List of Essential Medicines.</div>	<div><div><div></div><div></div><div></div><div>4</div></div><div><div><div></div><div></div><div></div><div>4</div></div></div></div>	<div>All essential meds (listed by WHO) for pain are available and there are no differences between urban and rural areas.</div>
<div>Ind10:1</div> <div>10.1.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</div> <div>10.1.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</div>	<div><div><div></div><div></div><div></div><div>4</div></div><div><div><div></div><div></div><div></div><div>4</div></div></div></div>	<div>Sevredol tablet (morphine sulphate) is available at the primary level and there do not exist urban-rural differences.</div>
<div>Ind10:2</div> <div>10.2.1. Percentage of health facilities at the primary care level in urban areas that have different opioids and in different formulations.</div> <div>10.2.2. Percentage of health facilities at the primary care level in rural areas that have different opioids and in different formulations.</div>	<div><div><div></div><div></div><div></div><div>4</div></div><div><div><div></div><div></div><div></div><div>4</div></div></div></div>	<div>Oxycodone and fentanyl are available with no differences across rural and urban areas.</div>

EU Hungary

<p>Ind11</p> <p>11.1. The proportion of medical schools with COMPULSORY teaching in PC (with or without other optional teaching)</p> <p>11.2. The proportion of medical schools with OPTIONAL teaching in PC.</p> <p>11.3. The proportion of nursing schools with COMPULSORY teaching in PC (with or without other optional teaching).</p> <p>11.4. The proportion of nursing schools with OPTIONAL teaching in PC.</p> <p>11.5. PC Full Professors</p> <p>11.6. Legislation/regulations concerning PC education</p>	<p>0/4</p> <p>4/4</p> <p>91/91</p> <p>91/91</p> <p>0</p> <p>No</p>	<p></p> <p>Palliative care is part of obligatory clinical courses, e.g. Oncology and Family Medicine, and elective courses are available for undergraduate medical students. Since 2010, the National Health Committee proposed to integrate palliative medicine into all undergraduate and postgraduate medical education. In a study published in 2018, some universities included courses on palliative care in their curriculum. An outstanding example is the University of Pécs and Semmelweis University in Budapest. Some other medical universities in Hungary also offer basic palliative care courses as electives. In postgraduate medical education, palliative care is included in the formal training. From 2014, all junior doctors receive a systematic and standardized 40-hour educational programme on palliative care. Nursing education offers very advanced training on palliative care. An accredited training programme on specialised hospice palliative care is available for qualified nurses. Forty hours of training are required for any health care workers wishing to qualify for a hospice palliative position.</p>
<p>Ind12</p> <p>Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.</p>	<p></p> <p>Palliative medicine is a speciality or subspeciality (another denomination equivalent) recognised by competent national authorities.</p>	<p>It was accredited as a sub-specialty by the Decree on the continuing professional training of medical specialists, dentists, pharmacists and psychologists (23/2022 EMMI rendelet). In Annex 1 to the EMMI Decree No 23/2012 (IX. 14.), it is listed at the 'List of medical licences'.</p>

EU Hungary

<p>Ind13</p> <p>13.1. There is a system of specialised PC services or teams in the country that has a GEOGRAPHIC reach and is delivered through different service delivery platforms.</p> <p>13.2. Are available in HOSPITALS (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.</p> <p>13.3. Free-standing HOSPICES (including hospices with inpatient beds).</p> <p>13.4. HOME CARE teams (specialised in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.</p> <p>13.5. Total number of specialised PC services or teams in the country.</p>	<p></p> <p>Generalised provision: Exists in many parts of the country but with some gaps.</p> <p></p> <p>Ad hoc/ in some parts of the country.</p> <p></p> <p>Ad hoc/ in some parts of the country.</p> <p></p> <p>Found in many parts of the country.</p>	<p>There are 92 services, representing around 0,95 services per 100,000 inhabitants in Hungary: 26 inpatient facilities (416 beds, 411 adult beds, 5 children's beds), 60 home care groups (57 adult, 1 mixed and 2 children providers), 2 hospice mobile teams (hospital support group), and 4 palliative outpatient care.</p> <p>RATE OF SPECIALISED PC SERVICES/100,000 INH</p> <p>MEDIAN RATE IN THE REGION</p> <p>0.96</p> <p>HUNGARY</p> <p>0.95</p> <p>0</p> <p>MINIMUM RATE IN THE REGION</p> <p>3.68</p> <p>MAXIMUM RATE IN THE REGION</p> <p>92</p> <p>← SPECIALISED PALLIATIVE CARE SERVICES</p>
<p>Ind14</p> <p>14.1. There is a system of specialised PC services or teams for children in the country that has geographic reach and is delivered through different service delivery platforms.</p> <p>14.2. Number of pediatric specialised PC services or teams in the country.</p>	<p></p> <p>No or minimal provision of palliative care specialised services or teams for children exists in country.</p> <p>3</p> <p>PPC TEAMS</p>	<p>There are one inpatient centre for children (5 beds), and two home care services for children (in Pécs, there is the Szemem Fenyé Alapítvány – the Light of My Eyes Foundation for sick children, the Public Foundation for children oncology and hospice at the university of Pécs, and in Budapest, the Tabitha Pediatric Hospice House).</p>