



Helsedirektoratet

Norwegian Directorate of Health

National Health Portals in the Nordics

sundhed.dk

H E L S e
n o r g E

1177

Kanta

May 2025

Nordic Portal Analysis timeline

- Since 2019, representatives from government agencies in Norway, Sweden, Denmark and Finland have collected data on usage and functionality of the different national health portals.
- Agencies involved
 - [The Norwegian Directorate of Health](#)
 - [Inera](#)
 - [Sundhed.dk](#)
 - [Kela](#)
- The report seeks to compare the portals using a selection of key metrics to uncover differences and similarities between the Nordic countries.

Comparative Analysis 2025: Summary

The effect of the pandemic has diminished, and countries have returned to pre-COVID trends

- Usage continues to grow in Sweden and Norway, while Finland and Denmark have a different portal landscape.

The gap between open visits and logins is closing

- There is increased focus on developing services available after users log in.

More citizens are accessing health portals via mobile devices

- Development efforts are concentrated on improving functionality for mobile web formats.

Greater focus on expanding existing services and enabling actions on behalf of next of kin and healthcare personnel

- New solutions are being developed to allow access for both relatives and healthcare professionals.

EHDS (European Health Data Space) is seen as a driver for further development

- National health portals are increasingly acting as gateways for citizens to access their health information.

Key information – Nordic National Health Portals

Service/ content	Page	Denmark	Finland	Norway	Sweden
Name of portal/URL	-	sundhed.dk	MyKanta/kanta.fi	Helsenorge	1177.se
Year started	-	2003	2010 (2007)	2011	2013 (1999)
Million visits 2024 (2023)	8-15	55 (62)	19 (19)	131 (110)	199 (187)
Visits / logins per year per capita	16-17	9/ -	3/7	23/ 18	19/16
EHDS					
Net Promoter Score / brand awareness	29	29/96%	good/87%	47 /99%	45/99%
Most frequent user: Gender/ Age group	30	Female, age depends on the chosen solution	Female, 18-35	Female, 35-45	Female, 30-39
Use by health care personnel	31	Yes	No	No	Yes
Option to act on behalf of close acquaintances	32	Yes	Yes	Yes	Own children 0-13 years
Disease and treatment information	33	Yes	-	Yes	Yes
Portal as app	35	Yes	Coming 2025	Yes	Yes
Single portal / multiple portals	36	Multiple	Multiple	Single	Single
Best case	38-42	MedicinCard on minSundhed app	Acting on behalf of another person in MyKanta	Self-management of patient transport	1177 for Healthcare Professionals

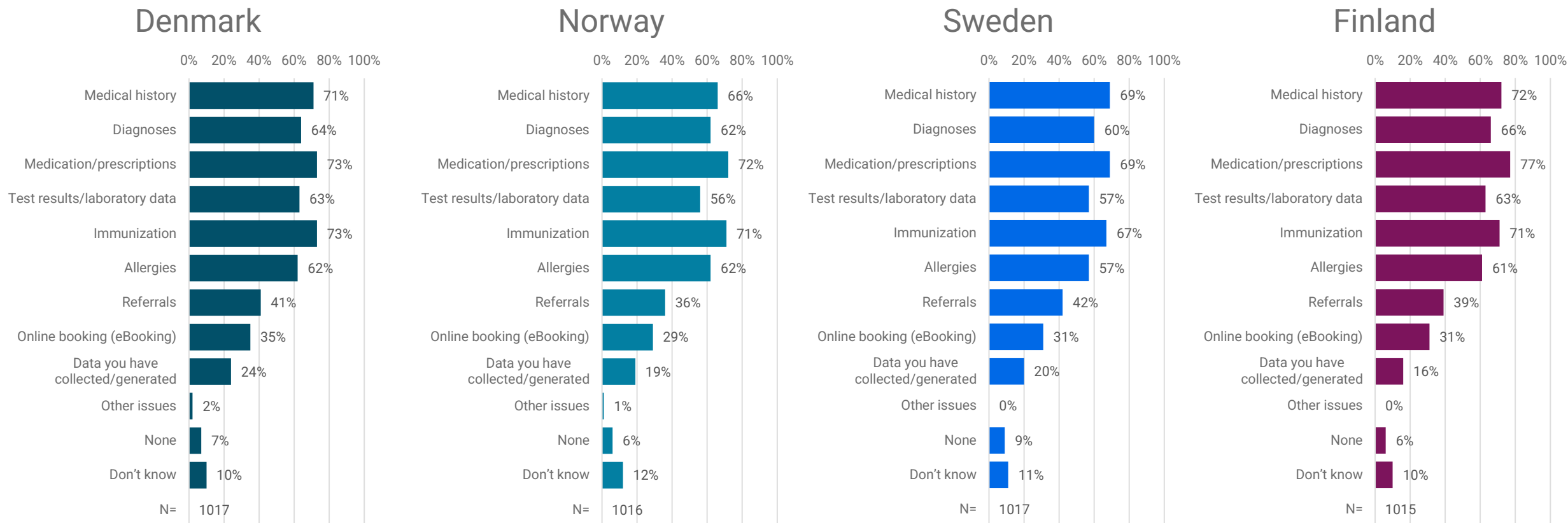
The Nordic Region

- Among the highest ranking healthcare systems in Europe and in the world
 - Longevity
 - Satisfaction
 - Financing
- Health Index score
 - [Health index of countries in Europe in 2023 | Statista](#)
- Health status OECD
 - [Health at a Glance 2023 - OECD](#)

How does this translate into good health portals?



In the case of the need for personal treatment in another Nordic country, which digital health data would you then accept to share across healthcare providers (e.g. hospitals, outpatient clinics, etc.) in the Nordic Countries?



Source: [A Nordic survey to monitor citizens use and experience with eHealth \(2023\)](#)

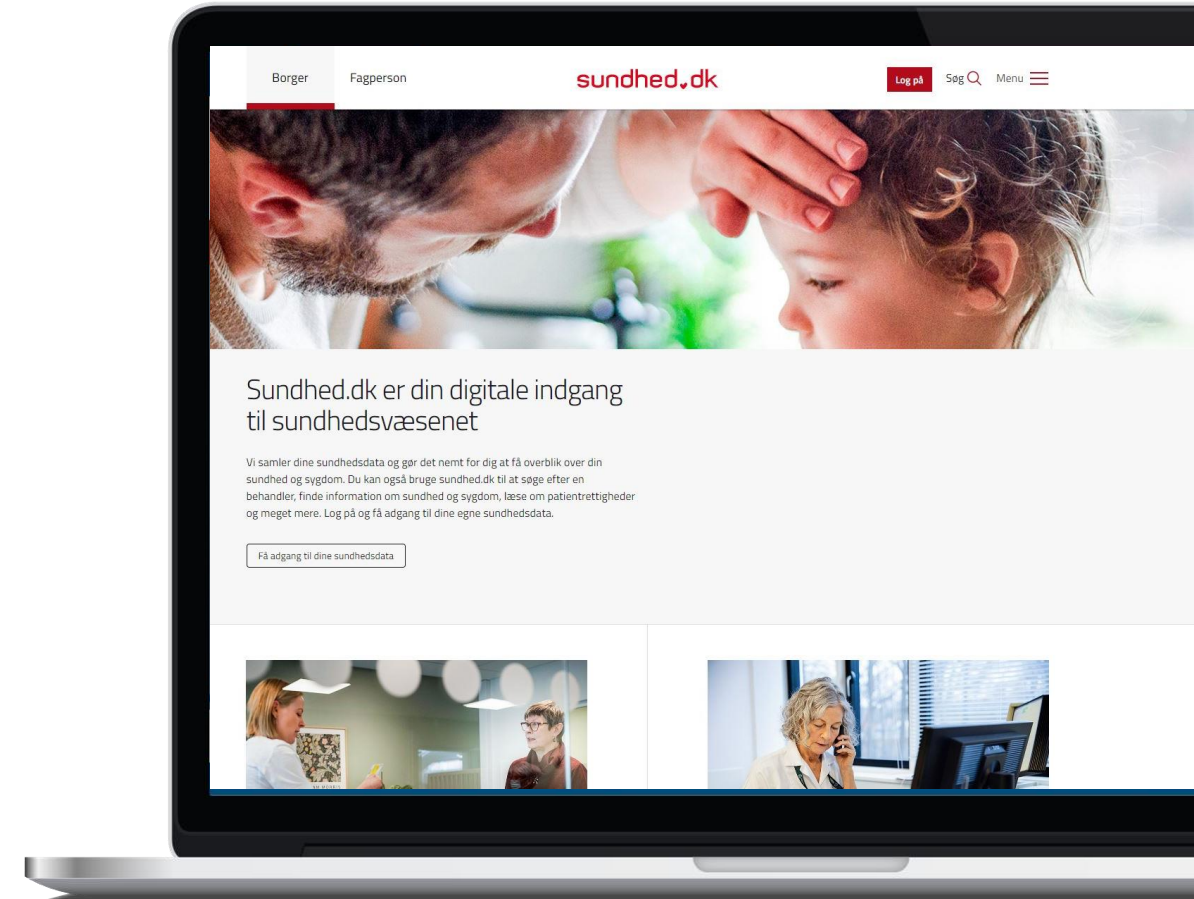
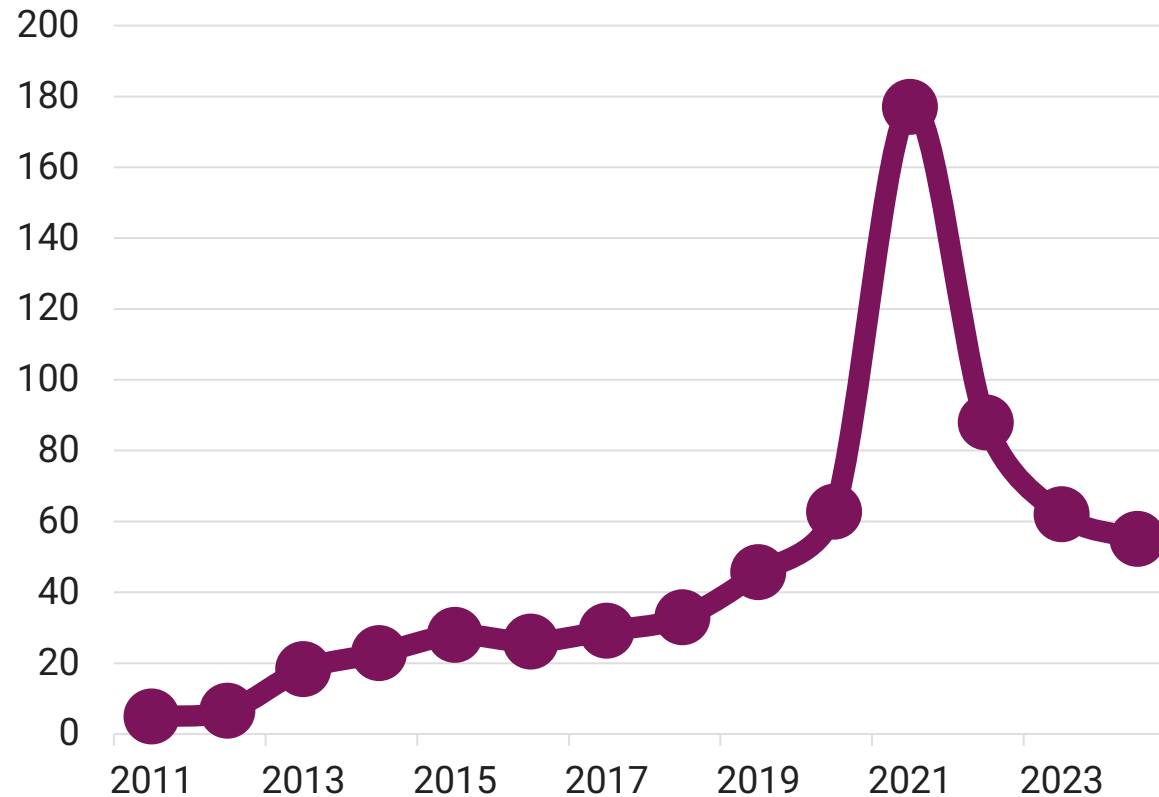
Country profiles

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Sundhed.dk

Annual visits to Sundhed.dk (millions)*

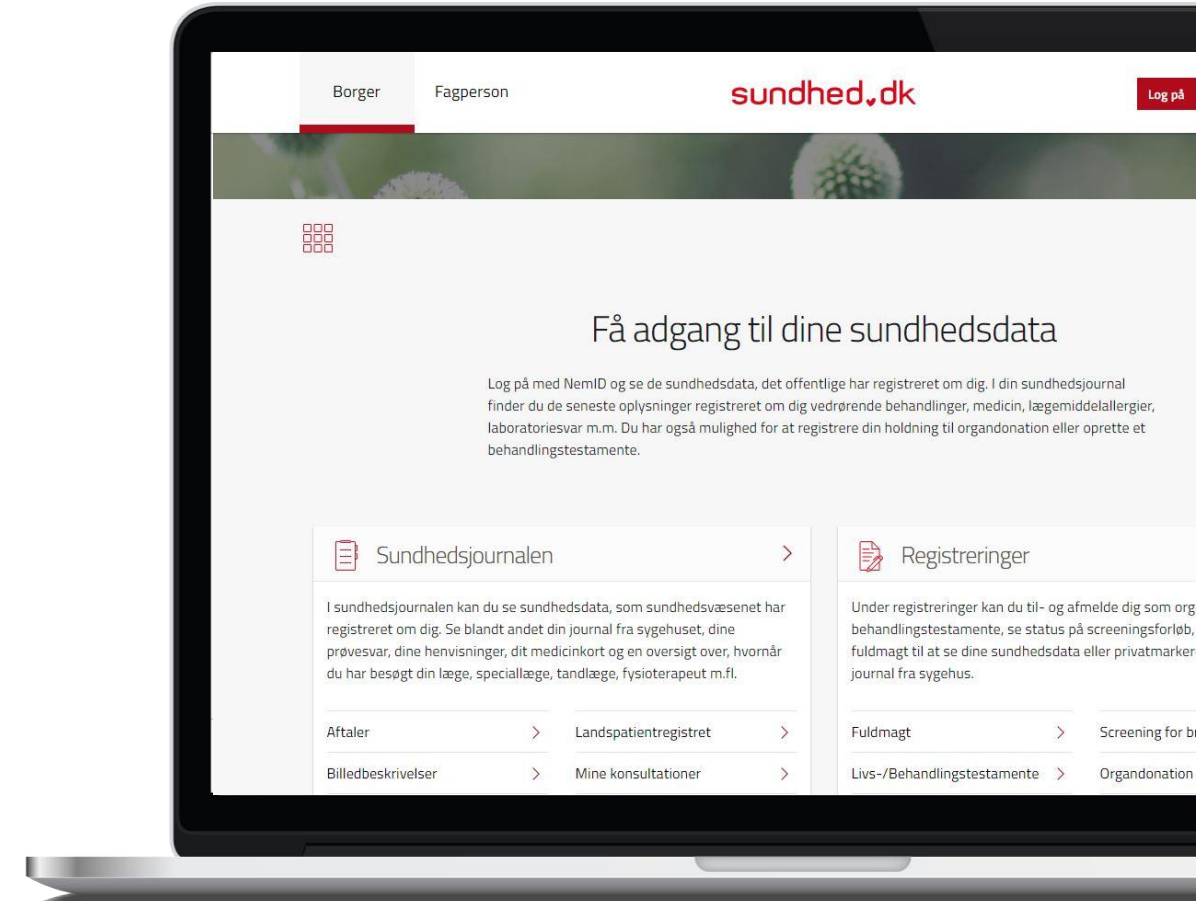
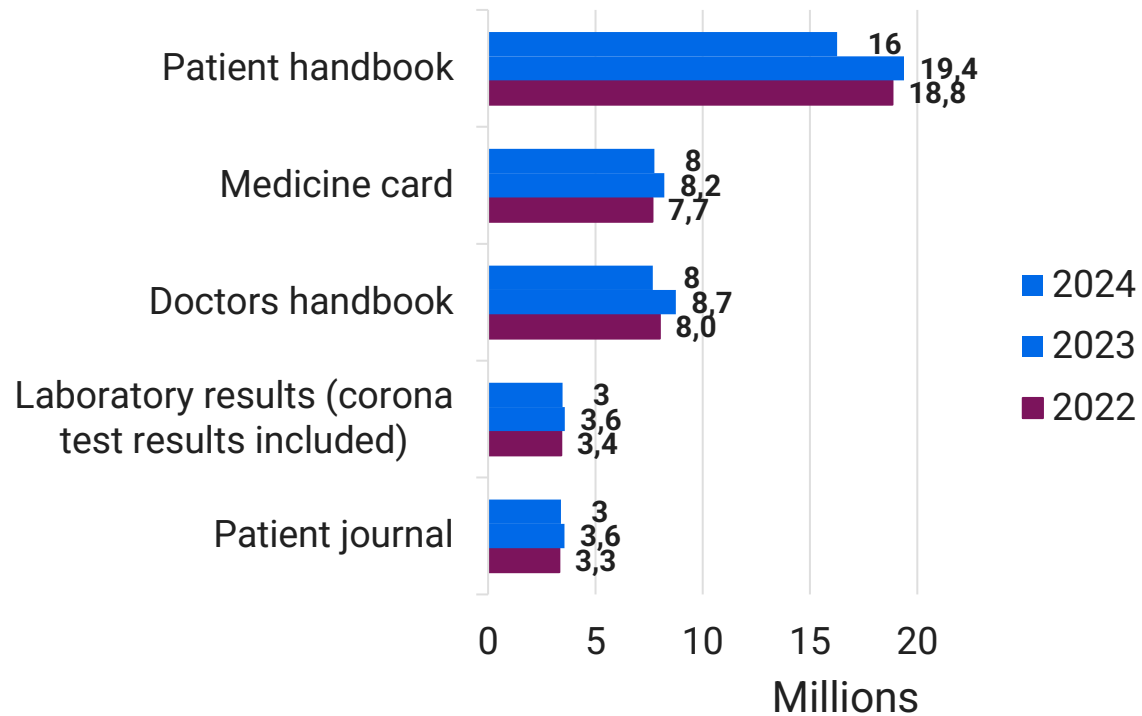


*Figures are updated to include traffic through mobile app



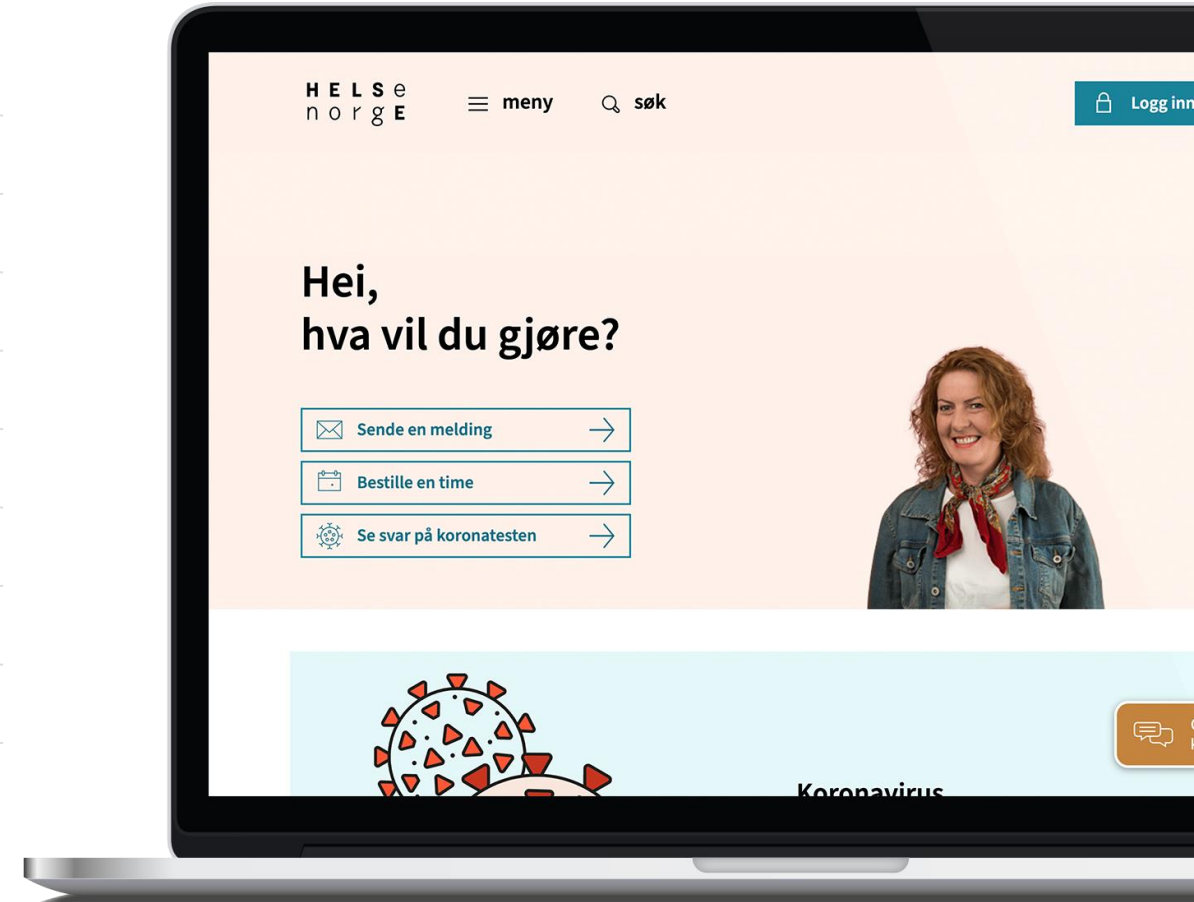
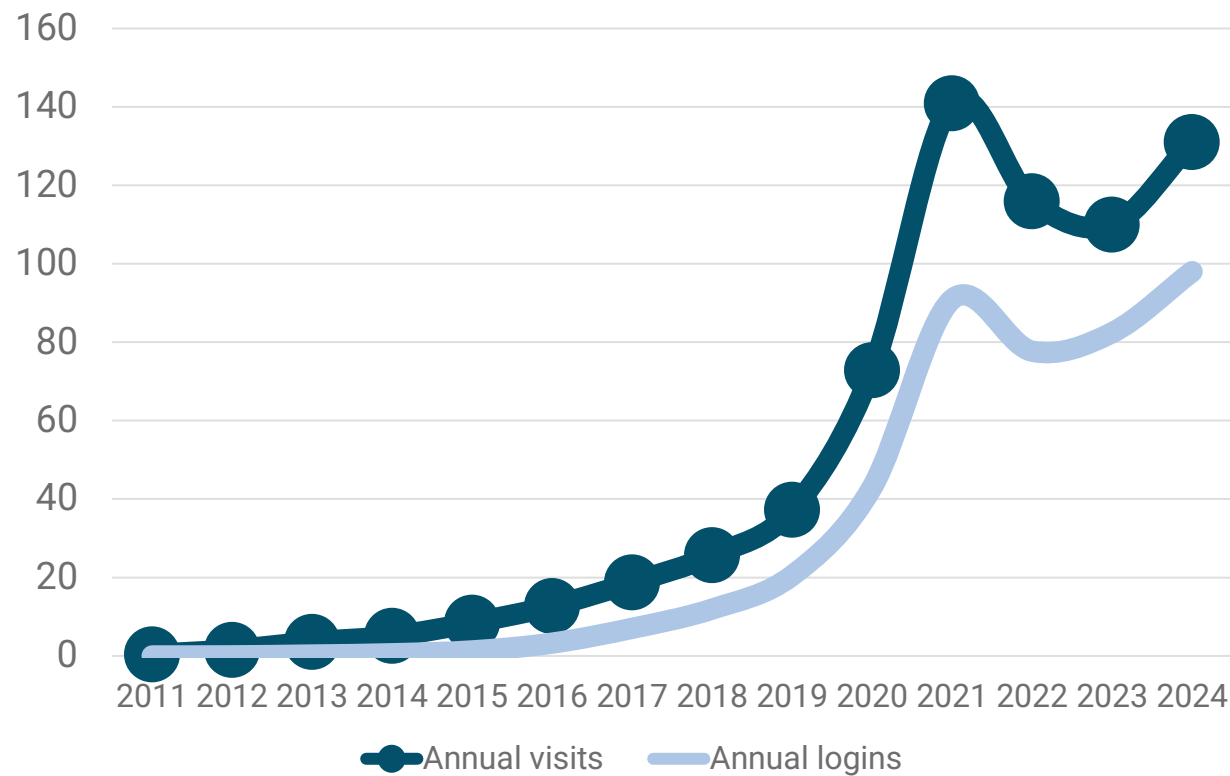
Sundhed.dk – most popular services

Sundhed.dk- the most used services 2022-2024



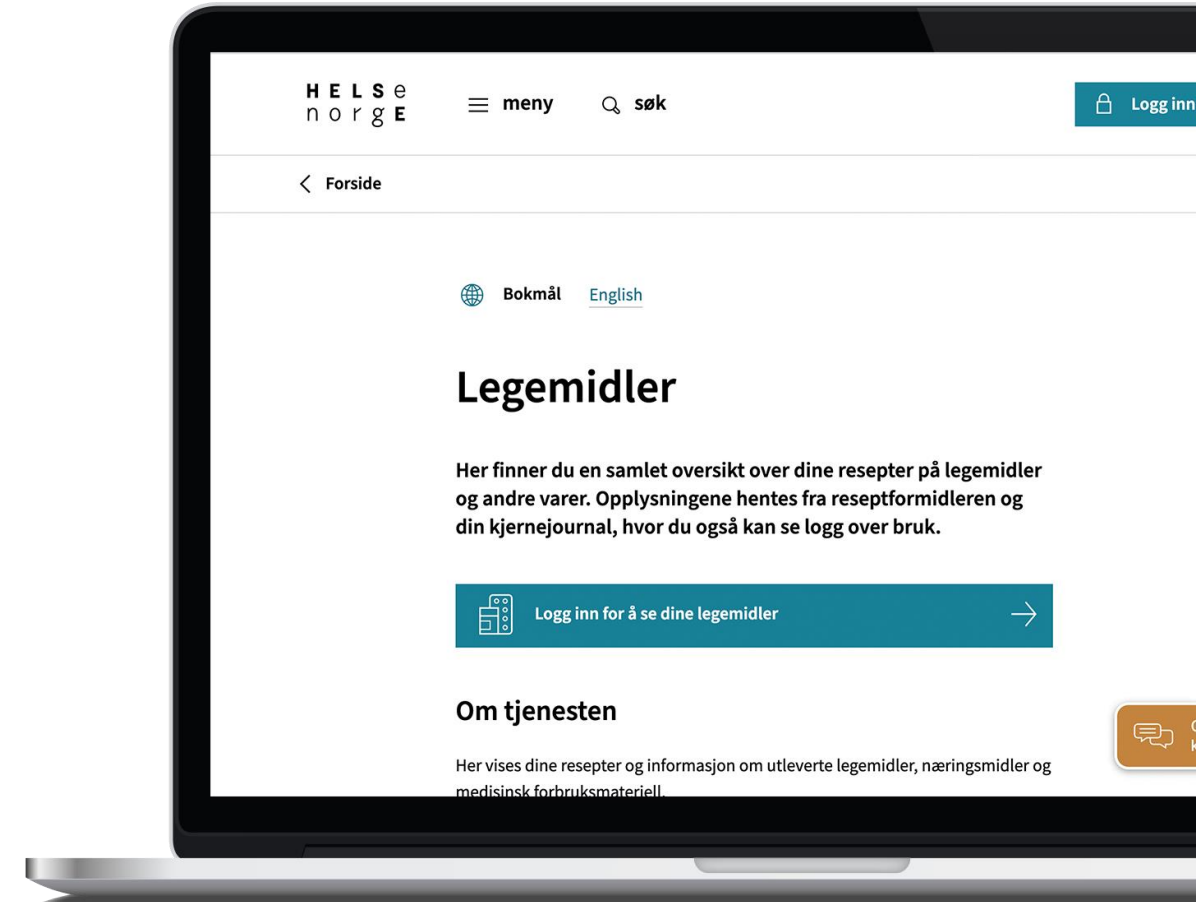
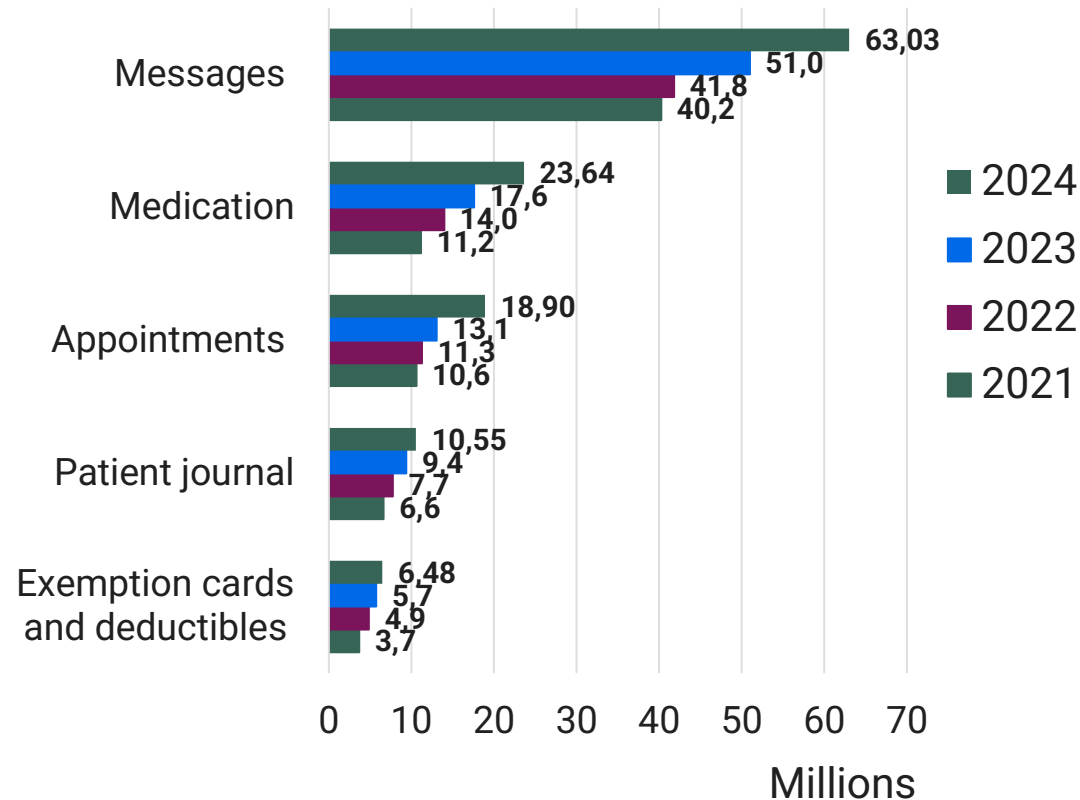
Helsenorge

Annual visits and logins to Helsenorge (millions)



Helsenorge – most popular services

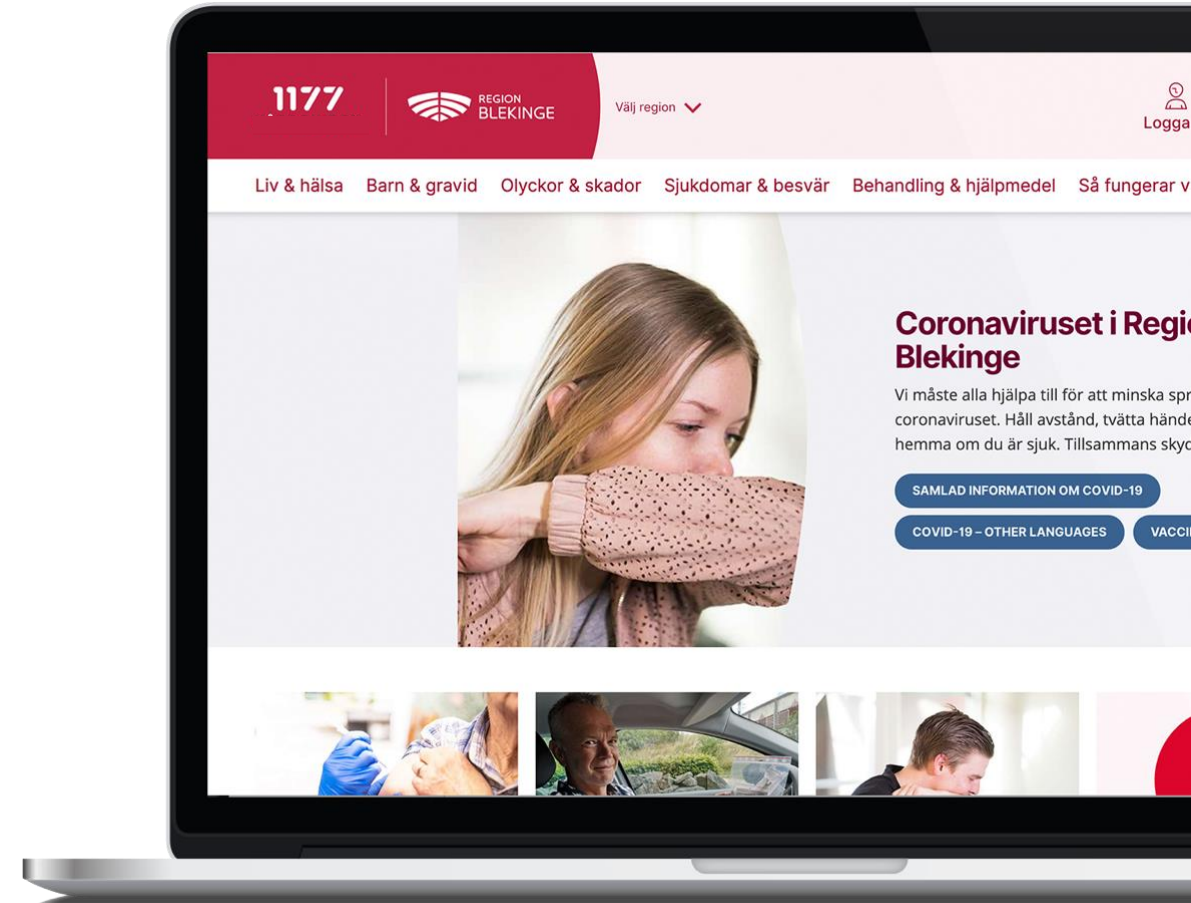
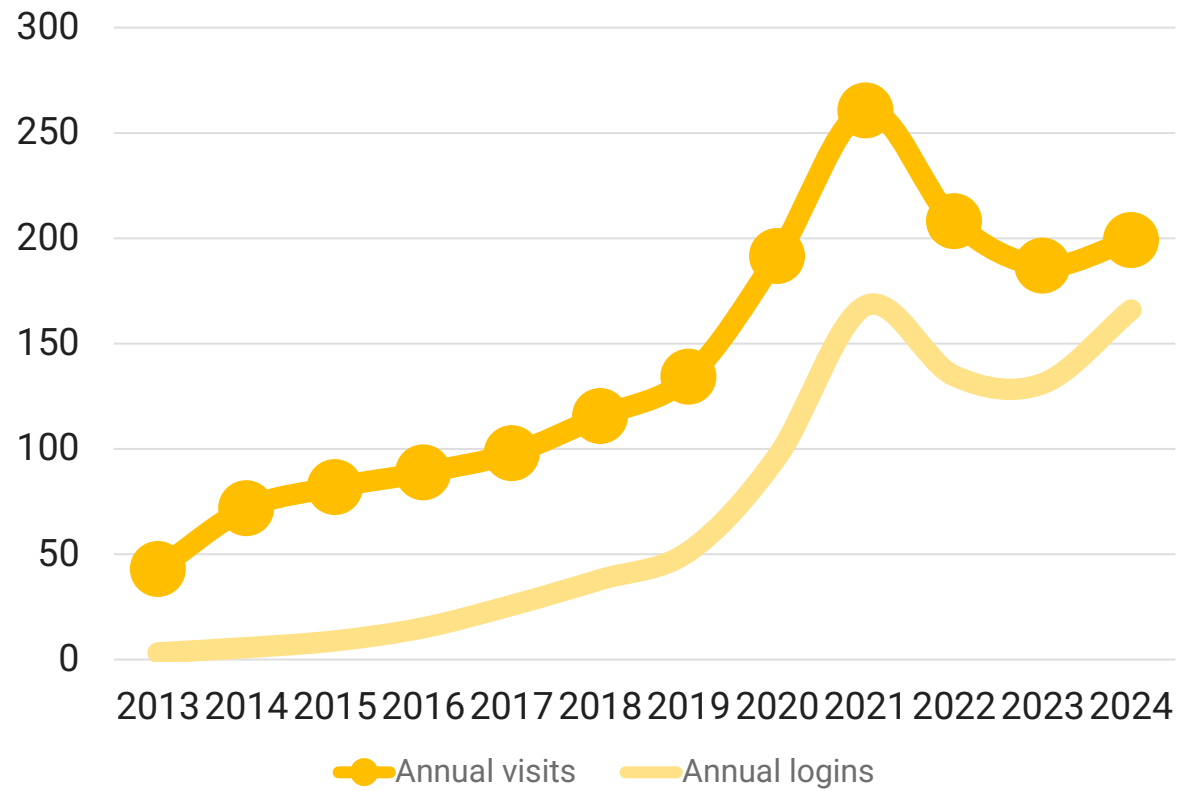
Helsenorge - the five most popular services
2021-2024





1177

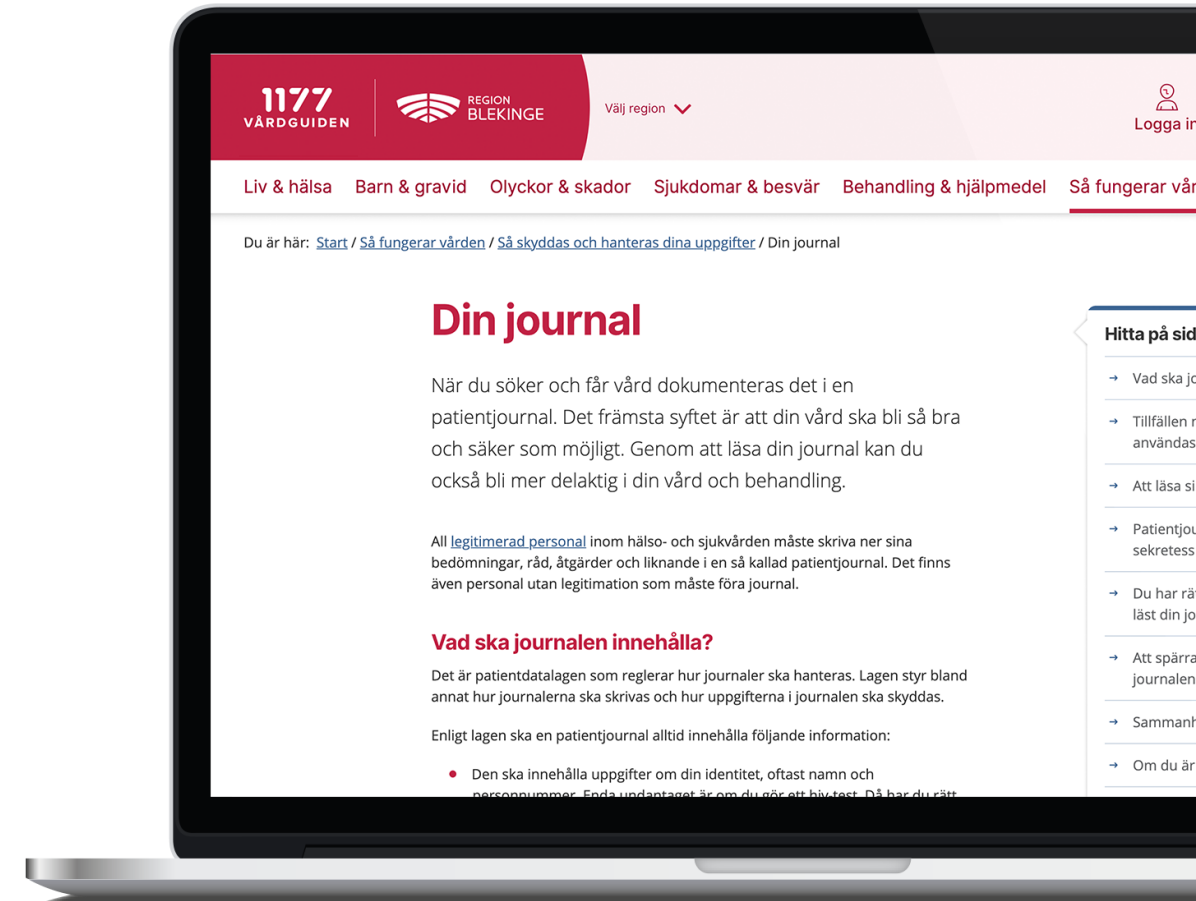
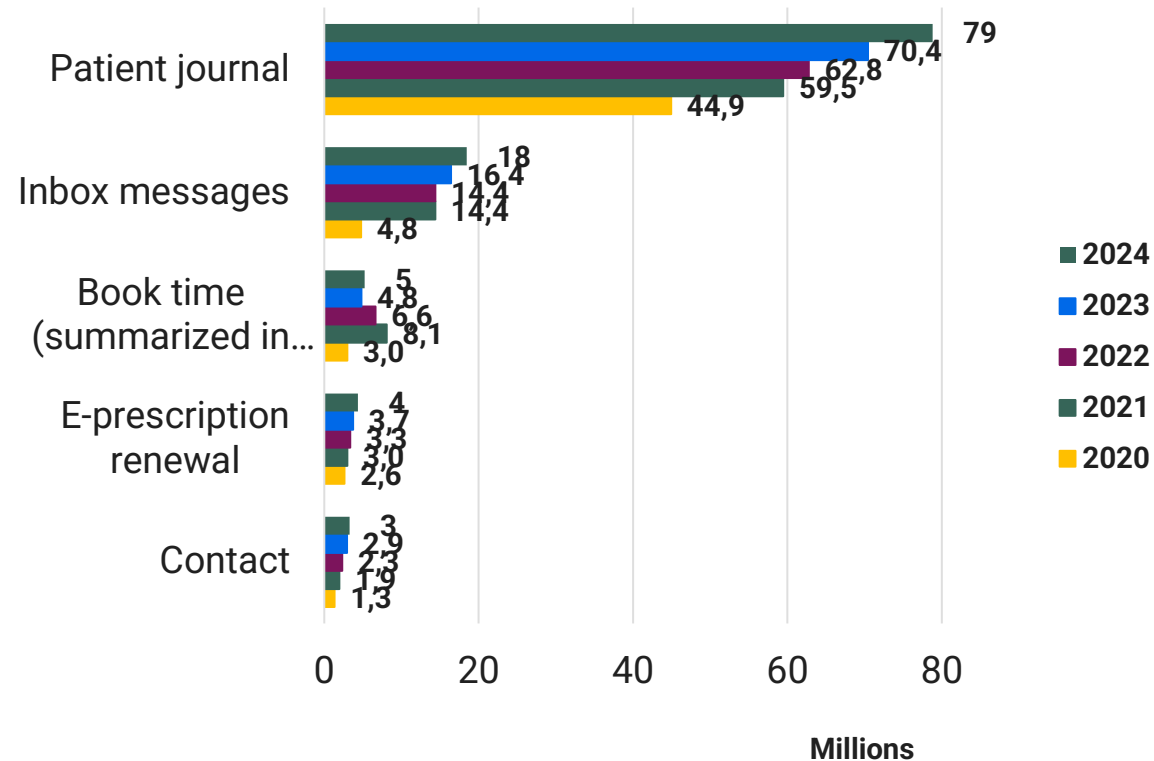
Annual visits and logins to 1177 (millions)





1177 – most popular services

1177 - the five most popular services 2020-2024

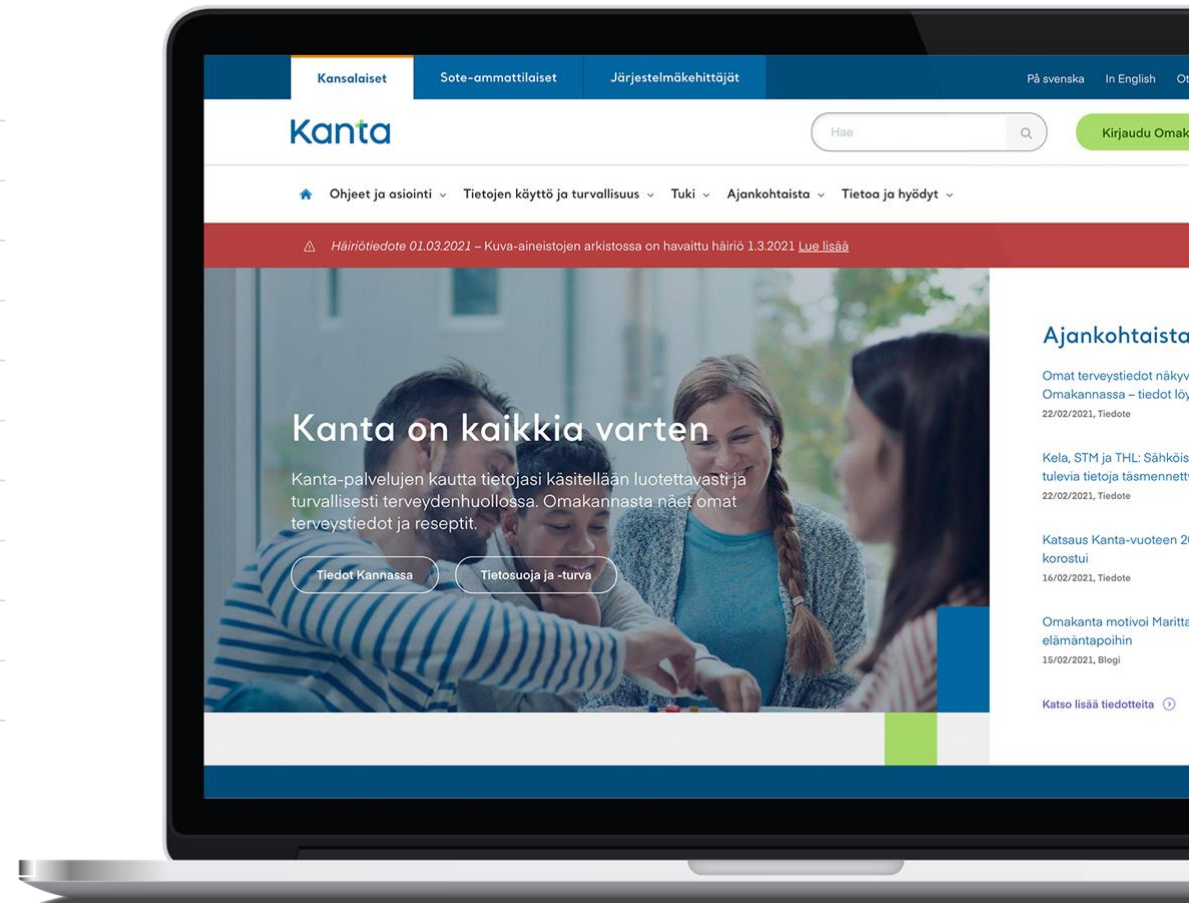
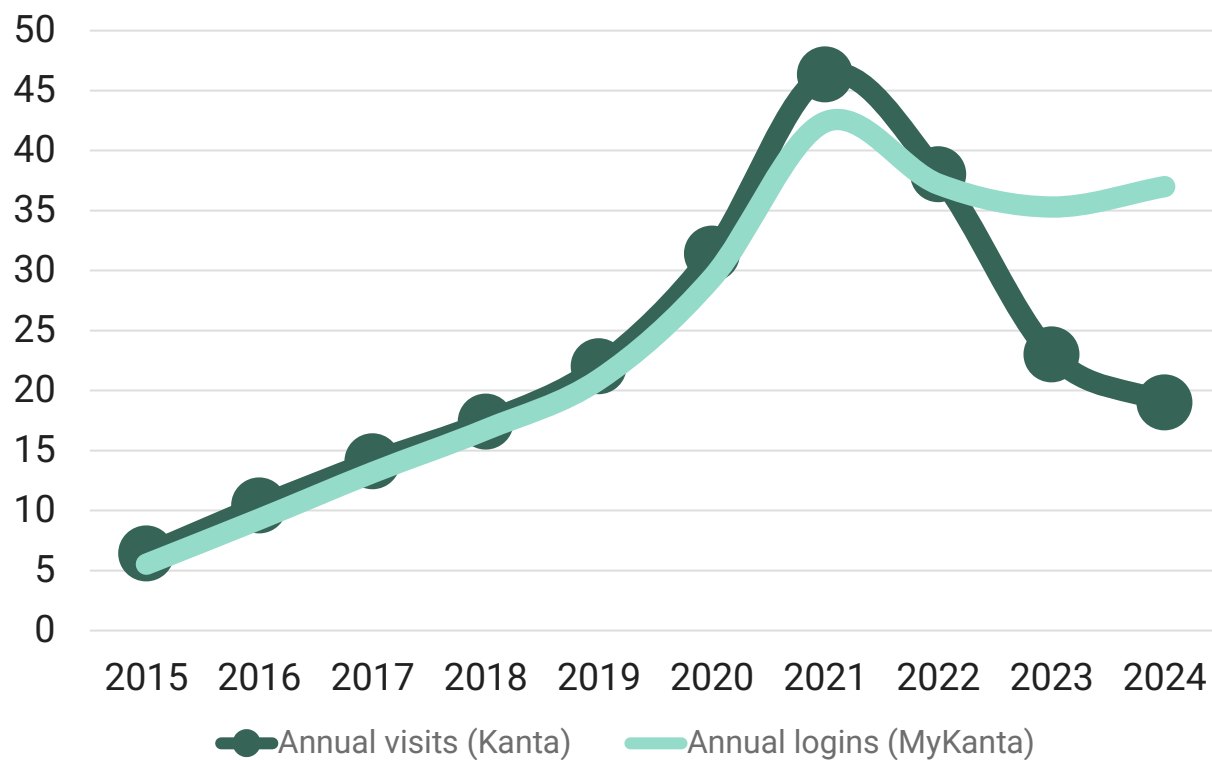


In addition, there are about 3 000 articles on symptoms, diseases, treatments and proactive healthcare and information about your legal rights as a patient

MyKanta



Annual visits to Kanta.fi and logins to MyKanta (millions)

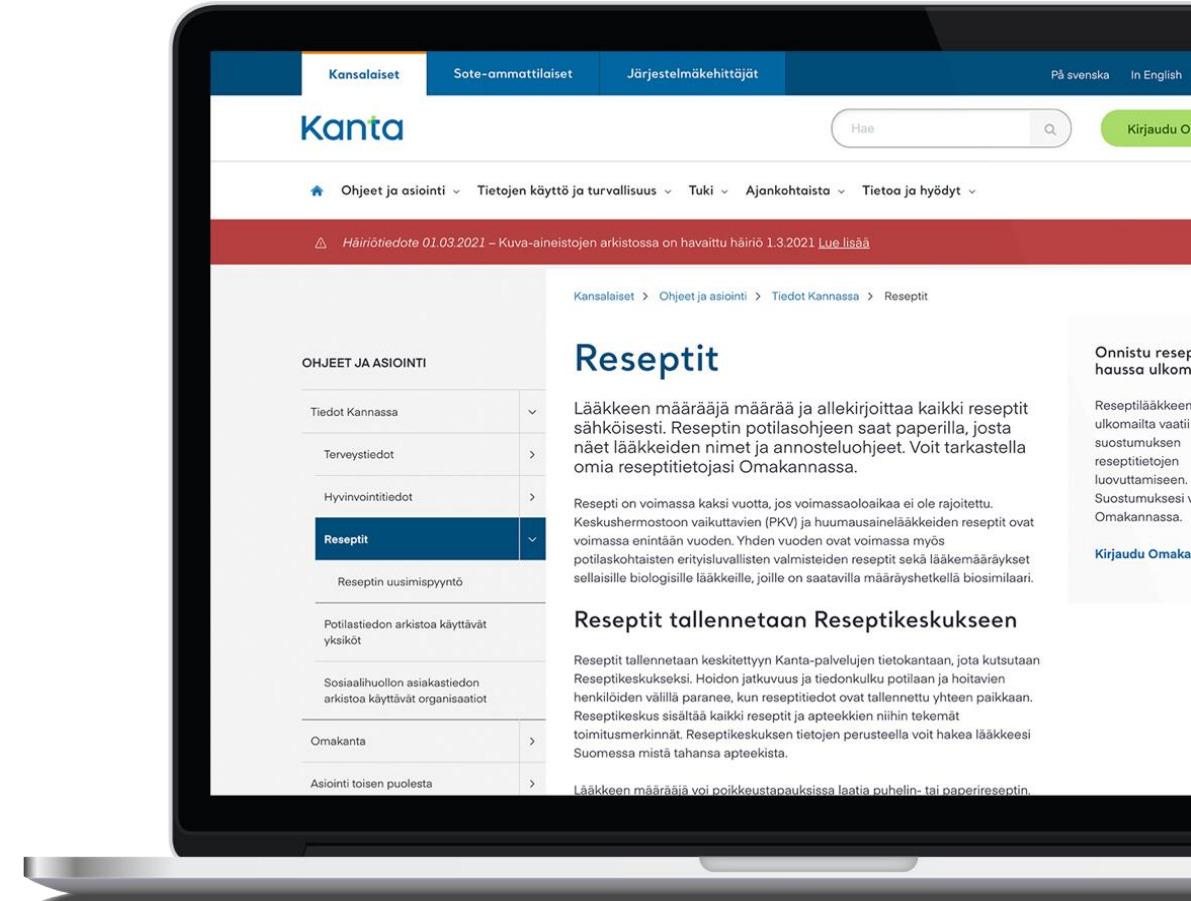
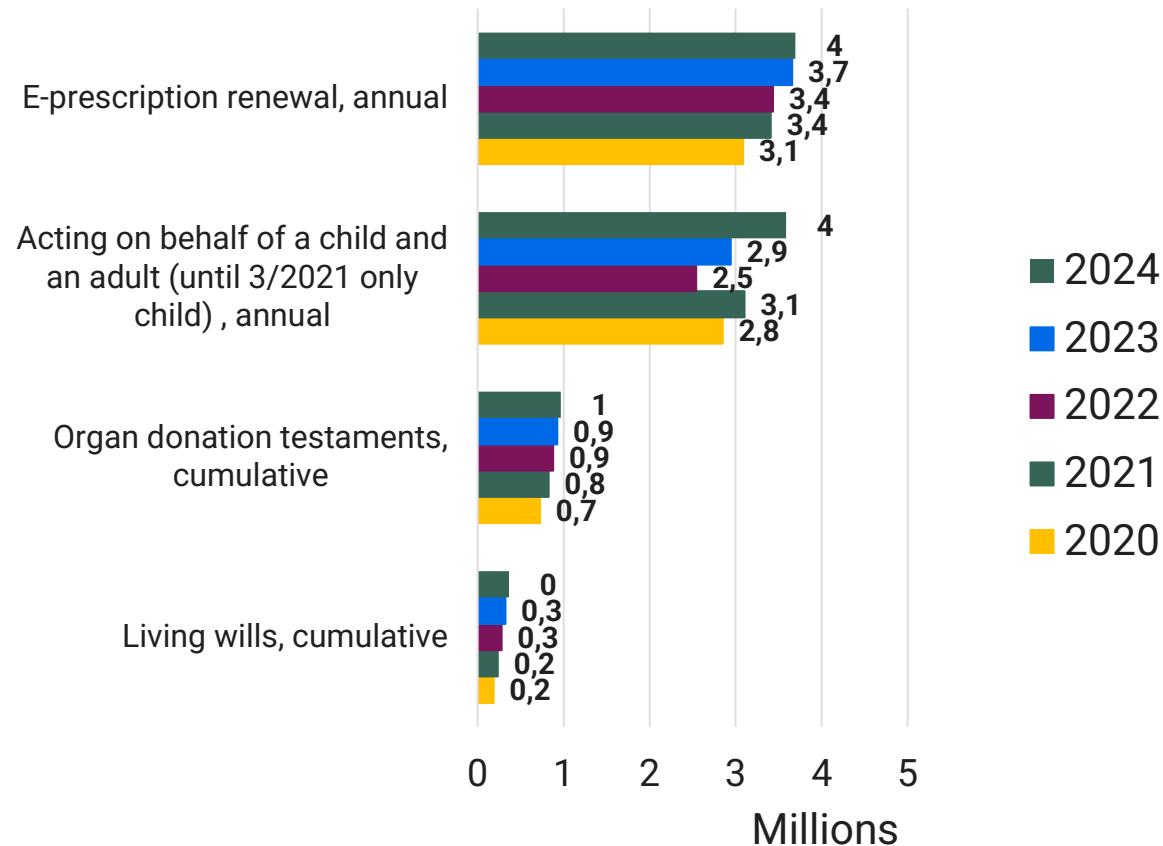


Notice: Cookie notifications changed in Kanta.fi at March 2023. The decrease in the number of visits is partly due to this.



MyKanta – most used services*

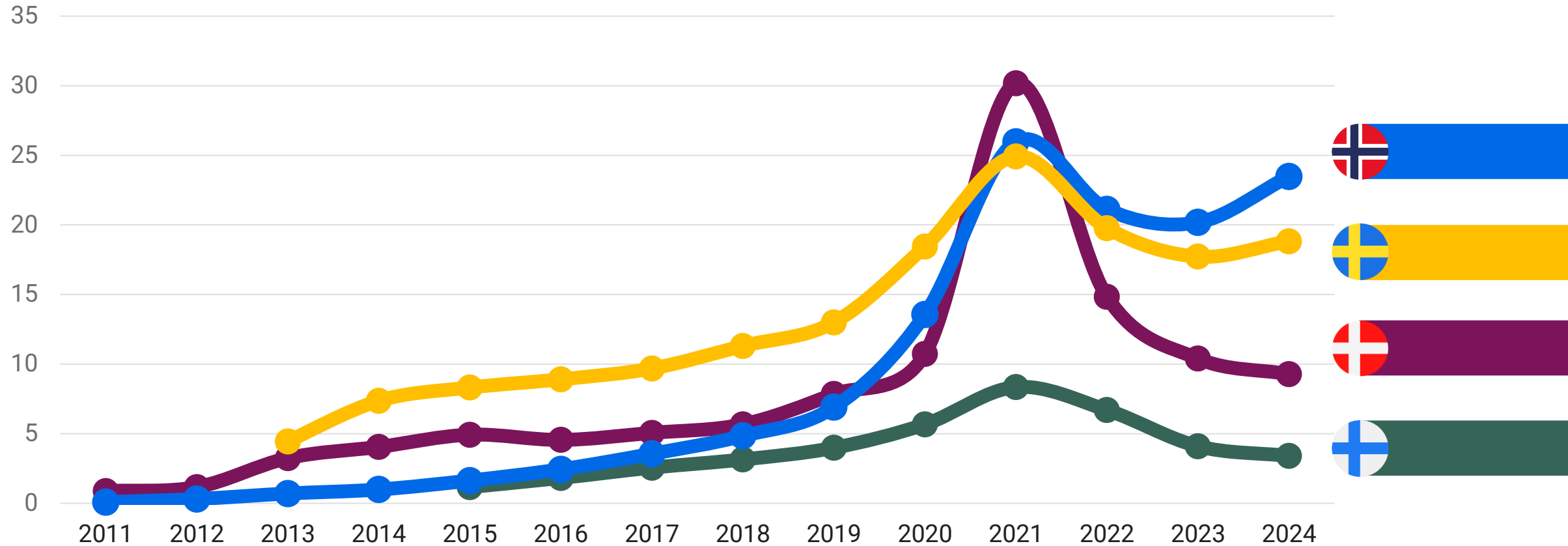
MyKanta - the most used services 2020-2024



*Note: Based on active user input. Not cookies or traffic data.

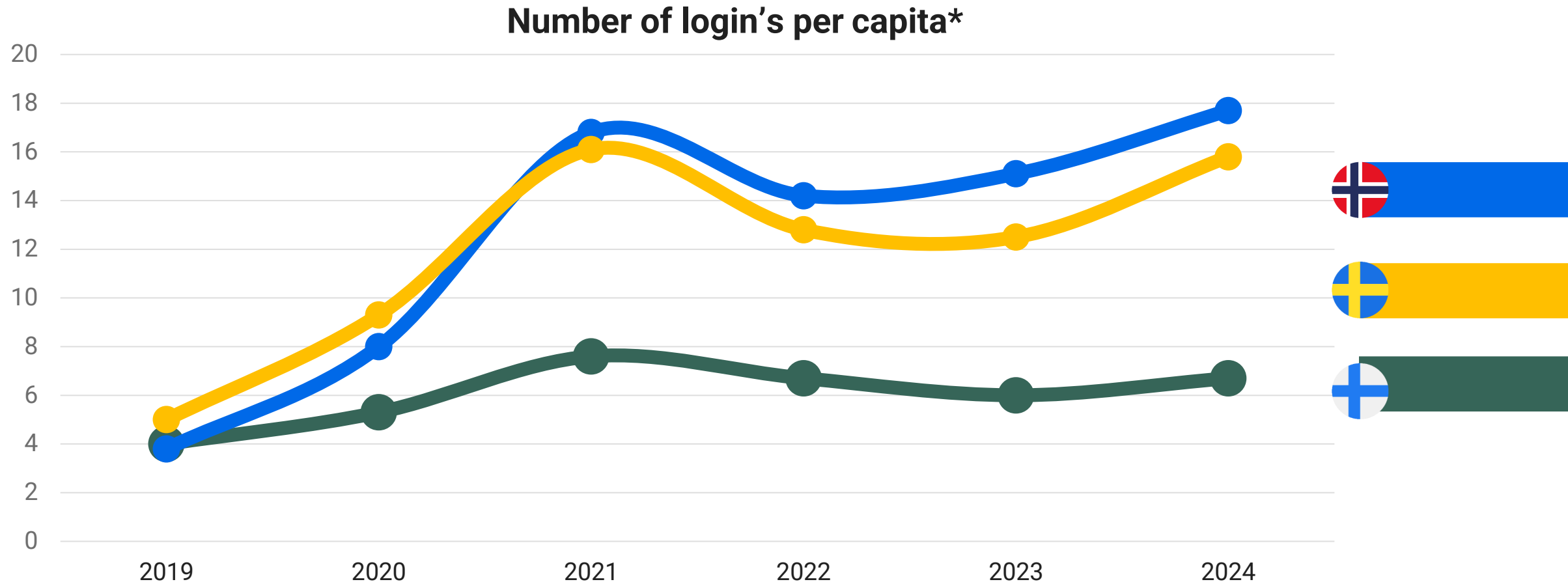
Visit picking up speed in Norway and Sweden, and decline flattening out in Denmark

Annual visits to national health portals per capita*



*Finland has changed cookie settings--- uncertainty related to numbers

Comparison of login per capita before and after pandemic reveal substantial growth



*Missing equivalent data from Denmark

European Health Data Space

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What is EHDS?

- The European Health Data Space (EHDS) is a EU initiative aimed at transforming the way health data is used across Europe. It establishes a common framework for the secure exchange and use of electronic health data, with the goal of improving healthcare delivery, fostering innovation, and supporting health research and policymaking.

EHDS has two core pillars:

- **Primary use of data:** Ensuring that individuals can easily access and control their personal health data across EU countries, enabling better cross-border care and empowering patients.
- **Secondary use of data:** Enabling researchers, innovators, and policymakers to access anonymized health data in a secure and ethical manner for public interest purposes, such as research, innovation, and public health planning.

Role of portals in context of EHDS



Citizens access their health information through national health portals.

The national portals contain a wide variety of digital health services that empower citizens to make informed decision about their health



Health portals as a gateway to manage health data sharing:

The EHDS grants citizens specific rights related to data handling and consent that can be administered through the national portal



Better data sharing domestically

Through common EU standards more health data will become interoperable domestically

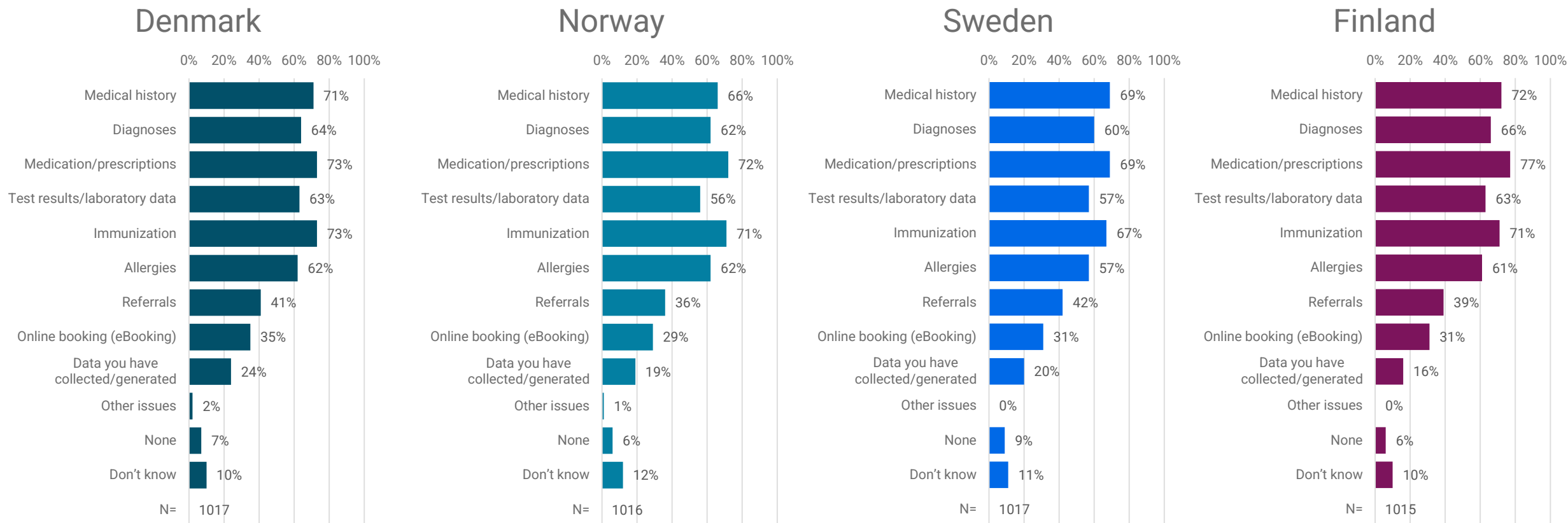


Important note:

This overview presents a limited selection of EHDS topics to illustrate similarities and differences.

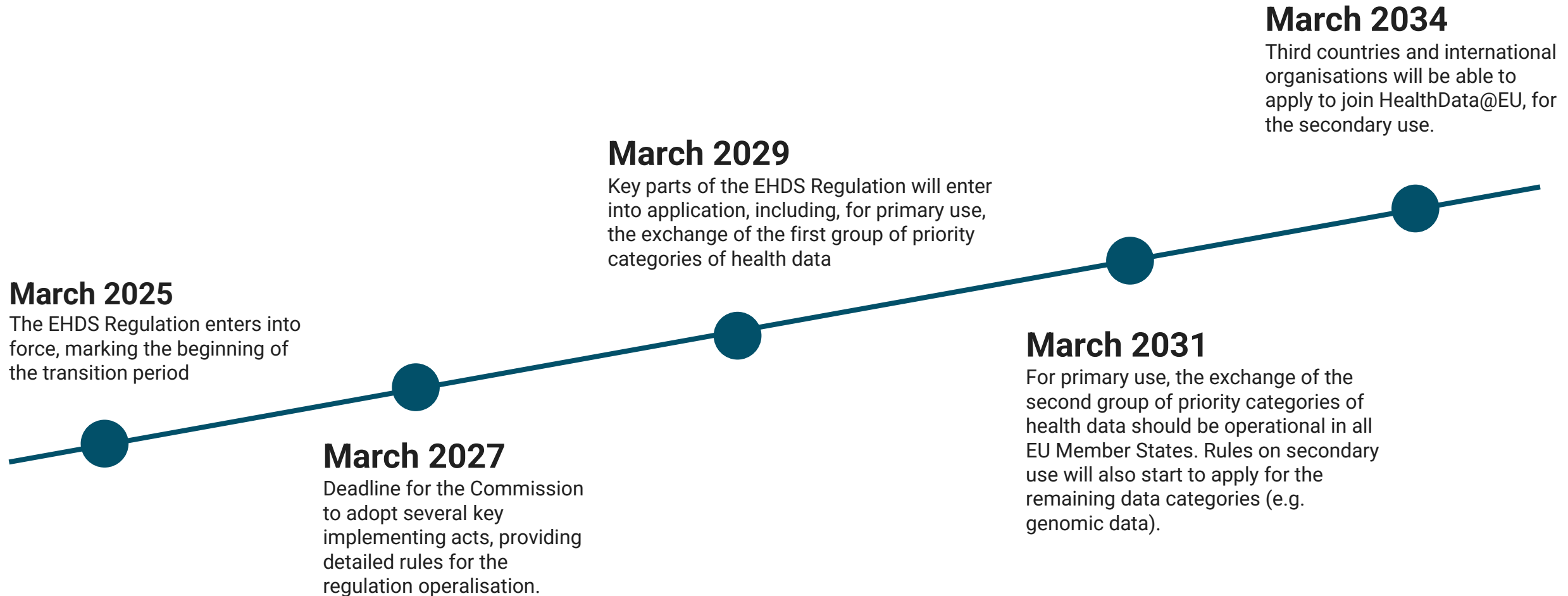
All information provided is subject to change in the coming years.

In the case of the need for personal treatment in another Nordic country, which digital health data would you then accept to share across healthcare providers (e.g. hospitals, outpatient clinics, etc.) in the Nordic Countries?



Source: [A Nordic survey to monitor citizens use and experience with eHealth \(2023\)](#)

What is EHDS?



Country profile: Denmark

Topic	Details
Citizen access	Danish citizens can access their personal health information through the national eHealth portal, Sundhed.dk. This platform provides a centralized overview of healthcare data.
Status of Secondary Standards	Denmark have several registres that administer access to health data, The Danish Health Data Authority have over 50 databases/registries, with 1000s of variables. Notable registries include Danish National Patient Registry, (DNPR), Danish National Prescription Registry and Danish Cancer Registry. Other governmental organisations also have various registries such as The Danish Center of Genome, Regions and others.
Health Data Access Body	The Danish Health Data Authority (Sundhedsdatastyrelsen) is proposed as the coordinating HDAB
Mandatory information Standards	Health information is registered within all the prioritized areas using different standards tailored to different types of health data, standards in use include HL7 FHIR, Snomed CT, ICD-10, SKS, ATC and NPU.
How is health informaton exchanged?	Denmark employs a hybrid model. Patient data is stored locally by healthcare providers, while aggregated data is centralized in national registries managed by the Danish Health Data Authority or by the regions (lab.reports, lab.orders, referrals).

Country profile: Norway

Topic	Details
Citizen access to and control	Citizens have access to their health data through citizen platform Helsenorge and HelsaMi. Through the app citizens can administer access to their data and perform different actions
Status of Secondary Standards	The Norwegian Institute of Public Health (FHI) has a long experience administering access to health data within the prioritized areas for secondary use, but EHDS requires sharing of data from more national sources.
Health Data Access Body	FHI is proposed as the coordinating HDAB as they already perform some similar functions today. No decision has been made.
Mandatory information Standards	Health information is registered within all the prioritized areas, but with varying degrees of detail, formatting and terminology, such as ICD-9, ICD-10, KURH, NPK, Snomed CT, FIHR, Health DCAT-ap. No national standard enforced.
How is health informaton exchanged?	Health data is primarily exchanged through predefined messages containing different codes. EHR's mainly use FHIR and some API. Patient information is predominantly stored locally.

Country profile: Sweden

Topic	Details
Citizen access	Citizens today have access to several digital services via the national portal 1177.se, which means that they can not only access prioritized categories of health data (with the exception of images), but can also perform a variety of different actions such as rescheduling care appointments, listing, electronic certificates sent to various recipients, communicate with care providers etc.
Status of Secondary Standards	Sweden lacks a national information structure for secondary use of health data. There is a national metadata catalogue of quality registers, health data registers and research registers, but it is not comprehensive (RUT).
Health Data Access Body	A governmental investigation has proposed that the National Board of Health and Welfare should be HDAB. No decision has been made.
Mandatory information Standards	There are mandatory national and international terminology systems in Sweden (ICD-10, KVÅ, Snomed CT etc). There are no mandatory information model standards, only local policy within organizations.
How is health information exchanged? Messaging / APIs	SOAP and REST based API:s. National information exchange for patient summary and laboratory reports is exchanged by SOAP-based services implementing a national XML-standard called BasicProfile. All the regions produce these SOAP-based services that the national infrastructure can consume. Newer services are developed using FHIR. Prescriptions and Dispensations are exchanged through FHIR REST API:s in a national database.

Country profile: Finland

Topic	Details
Citizen access	National health data access service (MyKanta) offers citizens a wide access to their social and health care data (e.g. patient records, examination data, medical certificates and prescriptions incl. renewal request). In MyKanta it is possible to act on behalf of another person. The assessment of the changes required by the EHDS are currently underway.
Status of Secondary Standards	Findata provides information about available datasets, and data controllers maintain dataset descriptions for their respective registers. Collaboration to harmonize these dataset descriptions across data controllers is currently underway.
Health Data Access Body	Currently Findata is the Finnish data permit authority for the social and health care data, and its activities are based on the national Act on the Secondary Use of Health and Social Data. The assessment of the changes required by the EHDS are currently underway.
Mandatory information Standards	In Finland, the national information architecture for social welfare and healthcare leans on nationally interoperable information models and specifications. It is mandatory to use them in patient and client information systems. Kanta services main standards are: HL7 V3: CDA R2 L3 and Medical Records, HL7 FHIR (Kanta Personal Health Record), JSON, XHTML (PHR and social services), PDF/A (old patient data and social services), IHE IT-I Profiles (imaging and eHDSI), W3C XML Dsig ,WS Addressing, WS-I, TLS, X.509
How is health informaton exchanged?	

Comparison slide

Country	Citizen access	Secondary use	Coordinating Health Data Access Body (C-HDAB)	Mandatory Information Standards	Health Information Exchange Method
Denmark	Sundhed.dk	Decentralized	Sundhedsdatastyrelsen	Multiple (...)	
Norway	Helsenorge/ HelsaMi	Centralized	FHI (Helsedataservice)	Multiple	Messages and API
Sweden	1177	Decentralized	National Board of Health and Welfare	Multiple	SOAP and REST based API
Finland	MyKanta	Centralized	Findata	Multiple	

Decided

Proposed

User groups

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How well known are the portals?

Denmark

- Citizens perception: **Good** (NPS*: 29(2024))
- 96% has heard of sundhed.dk (2023)

Finland

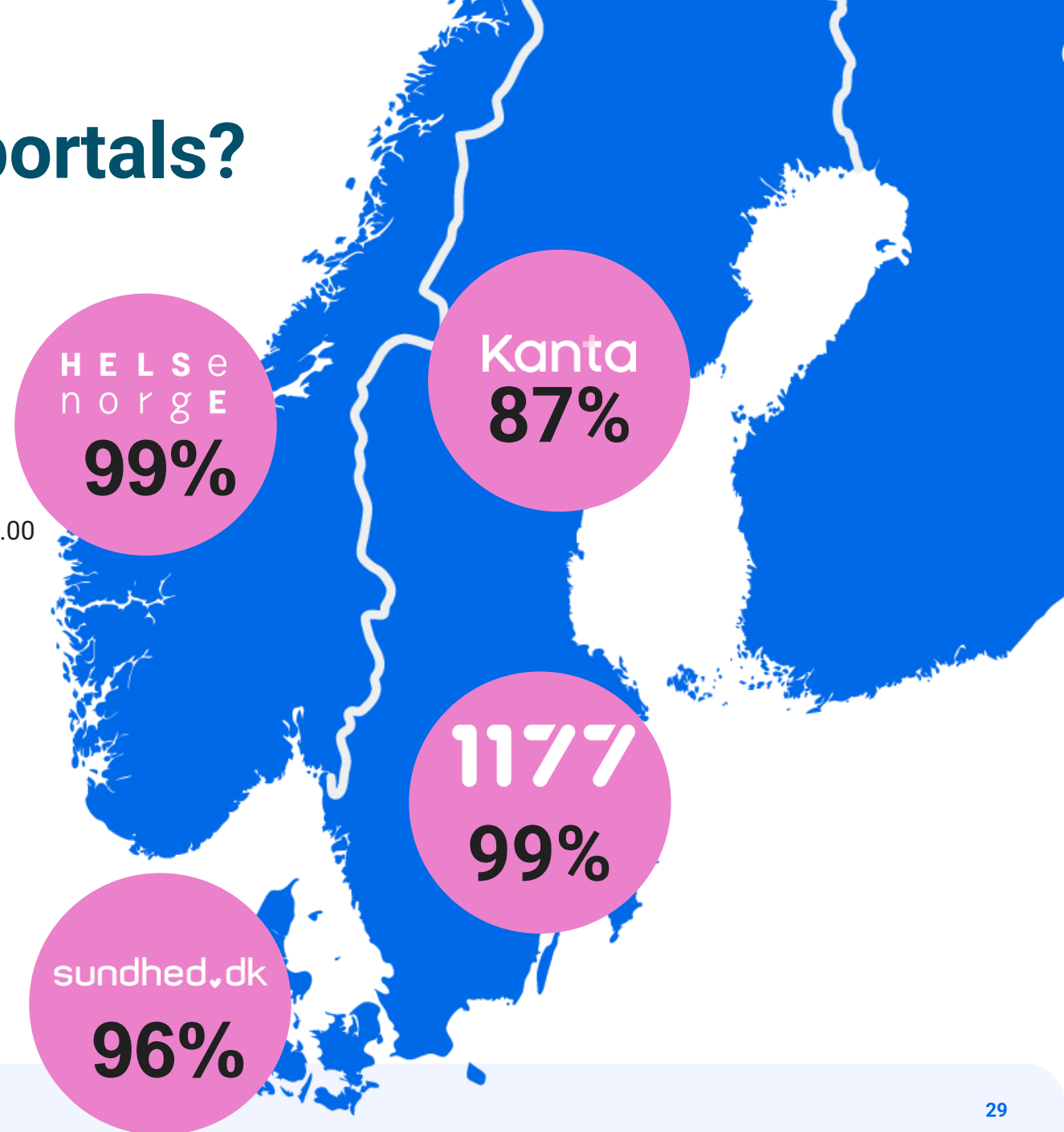
- Citizens perception: **Good** (Usage recommendation 3.96 /5.00 (2024))
- 87 % knows MyKanta at least by name (2024)

Norway

- Citizens perception: **Very good** (NPS: 47 (2024))
- 99% has heard of Helsenorge (2024)

Sweden

- Citizens perception: **Very good** (NPS: 45 (2024))
- 99.2% has “heard of 1177» (2024)





Usage by different population groups

There is an observable tendency that women use the health portals more proactively, while males use it when needed. Women represent the most frequent user in all countries accounting for roughly 60% of visits. Male usage gradually increase by age.

People who are between 30 and 50 years old, use the portals most frequently. However, different age groups use certain services more than others.

The youngest and oldest population groups are the least frequent users.

Usage by healthcare personnel



In Denmark and Sweden healthcare personnel are a targeted user group for the portals.



In Norway healthcare personnel use their own patient journal to access and edit information offered through Helsenorge. In Finland healthcare personnel can see the data stored in Kanta from their own information system.





Management of close one's health

In all countries citizens can act on behalf of their own children under the age of thirteen. EHDS is expected to further strengthen the focus on making health information available to close ones.



In Norway and Finland citizens can give power of attorney to others to act on their behalf. In Norway this is administered through the health portal, while in Finland this is administered through Suomi.fi e-Authorization.



In Denmark citizens can give power of attorney to others for a subset of the services available through Sundhed.dk.



Except for children under the age of 13 years old, citizens in Sweden can not act on behalf of others than themselves in 1177.

Denmark, Norway and Sweden's portals provide informational pages on disease and treatment



The portals provide information about diseases, symptoms and treatment. They are the most visited portal pages in Denmark, Norway and Sweden.



Denmark and Sweden provide a list of treatment providers, while Norway only partially offers this.



MyKanta in Finland does not have information about diseases or treatment.



Denmark, Norway and Sweden also provide information about patient rights on their portals.

Some of the portals also include lifestyle advice on how to stay healthy.



Information availability

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Denmark, Norway and Sweden also have apps with various functionality

Denmark

- App has a different interface and many functions found on portal

Finland

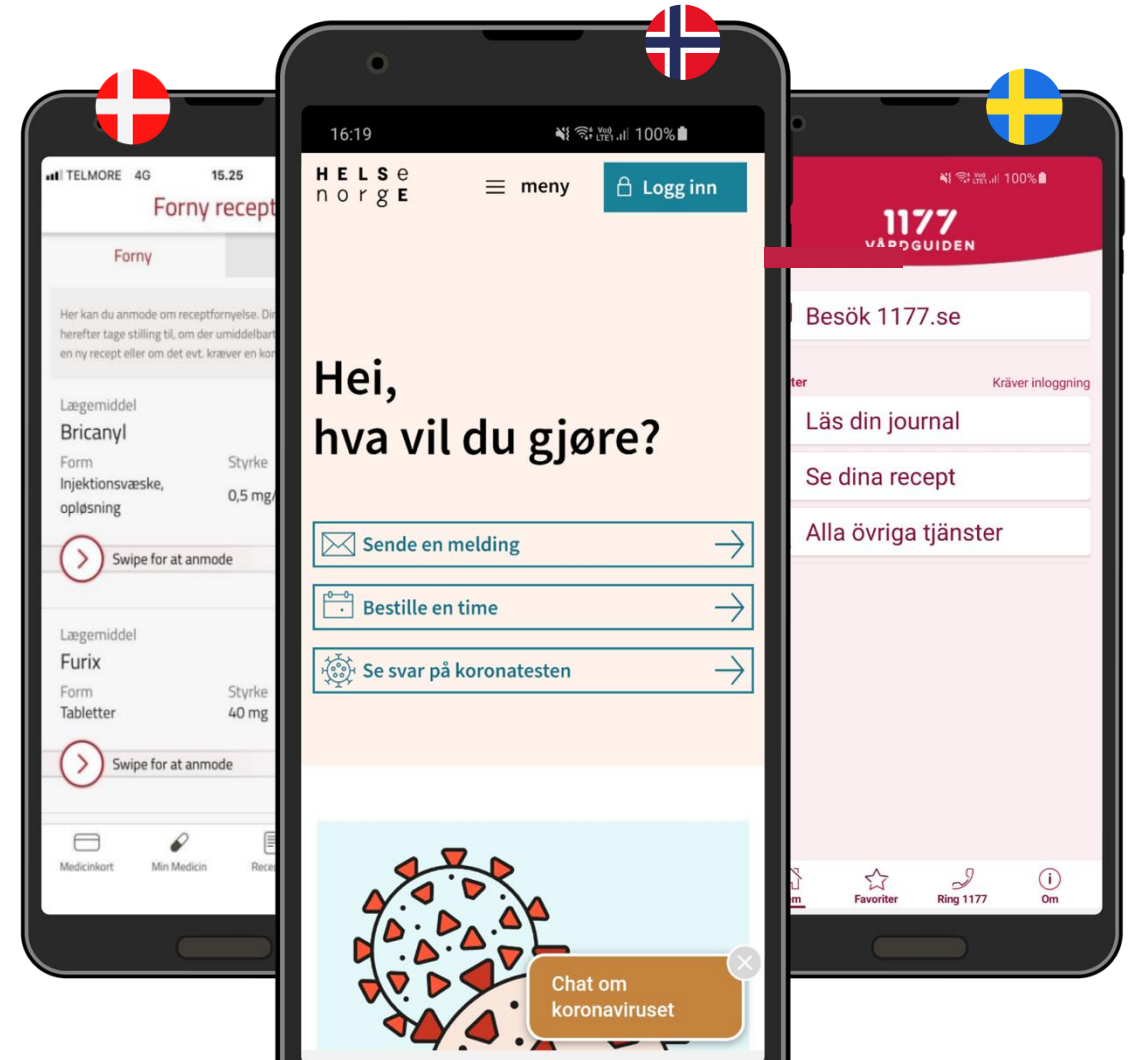
- MyKanta app will be available 2025 and webportal is mobile scalable

Norway

- App has similar interface and all functions found on portal

Sweden

- App has similar interface and all functions found on portal
- A more advanced mobile app is being developed.



Are there other health portals?

1177



1177 is the dominant point of access for citizens to view their health data and book appointments.

HELSE
NORGE



In Norway one out of the four health regions offer a supplementary regional citizen health portal.

sundhed.dk



In Denmark the capital region offer their own health portal. In addition, communication with GP's use a different app.

Kanta



Finland has multiple different portals where citizens can view their data.

Best case

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MedicinCard on minSundhed app



Issues	<ul style="list-style-type: none">Previously MedicineCard was a standalone app, but there was a big overlap of users of the old MedicinCard app and minSundhed app. Around 60% of users used both apps. Which created a worse user experience for those users.
How	<ul style="list-style-type: none">Users can now see their prescriptions, both old, current and refillable. Allowing them to be sure of what prescriptions they can pick up but also ask for a new prescription directly from their doctor – making it easier for themselves and the doctors.
Aim	<ul style="list-style-type: none">Currently we have seen an average increase of 50% more visits, up to 62% for the most recent month. The feature has registered over 500,000 visits per month and over 1,000,000 interactions per month with the feature
Use	<ul style="list-style-type: none">Deployed



Self-management of patient transport



Issues	<ul style="list-style-type: none">Getting to and from hospital treatments and doctors' appointments has required support from authorized medical staff to assess the need for patient transportation and often to support the booking process, for every single journey.
How	<ul style="list-style-type: none">The patient's travel needs are assessed once a year and registered by the clinician in an add-in the journal system that connects to Helsenorge.The patient can book transport independently via Helsenorge and view pickup and drop-off details according to their needs.
Aim	<ul style="list-style-type: none">Its success will be measured in the uptake of self service for patient travels and the evaluation and satisfaction scores by patient and carers, health personnel and patient travel staff.
Use	<ul style="list-style-type: none">Training material and guidance has been provided to clinical staff, so they know when and how to give patient access to self service. Based on good results and evaluations from the pilot, this launched as a nationally available service from April 2025.



Acting on behalf of another person in MyKanta



Issues	<ul style="list-style-type: none">Acting behalf of a minor or an adult in MyKanta enables for example to view the health data, renew prescriptions and view the results of laboratory tests.
How	<ul style="list-style-type: none">A guardian may act in MyKanta on behalf of a minor.An adult can act on behalf of another adult in MyKanta if they have been granted a Suomi.fi e-Authorization to do so.
Aim	<ul style="list-style-type: none">MyKanta makes everyday life easier when you have children.An elderly person or someone who has been taken ill may need help and it may be sensible that someone else will act on behalf of the person.For some people, it may be difficult to start using new digital services.
Use	<ul style="list-style-type: none">In 2024 almost 3.6 million transactions were made on behalf of another person using MyKanta. That is a new record.The guardians of 500,000 minors have acted on behalf of their children. That is approximately half of all minors in Finland.



1177 for Healthcare Professionals/1177 för vårdpersonal



Issues

- To ensure Sweden's healthcare system remains equitable and patient-centered, healthcare professionals need easy access to the latest, high-quality knowledge—before, during, and after patient interactions. This requires consistent use of clinical decision support and national guidelines across all regions.

How

- In June 2024, **1177 for Healthcare Professionals** was launched – a national hub that brings together clinical decision support tools under one unified platform. By simplifying access to reliable, evidence-based information, the website helps healthcare professionals deliver equitable, high-quality care regardless of location.

Aim

- To deliver a streamlined, user-friendly resource for healthcare staff in regions, municipalities, and private providers
- To promote equitable, evidence-based health, medical, and dental care across Sweden
- To enhance efficiency by supporting shared decision-making tools and optimized resources.

Use

- 1177 for Healthcare Professionals is available and in use in every region



What is ahead?

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Further development

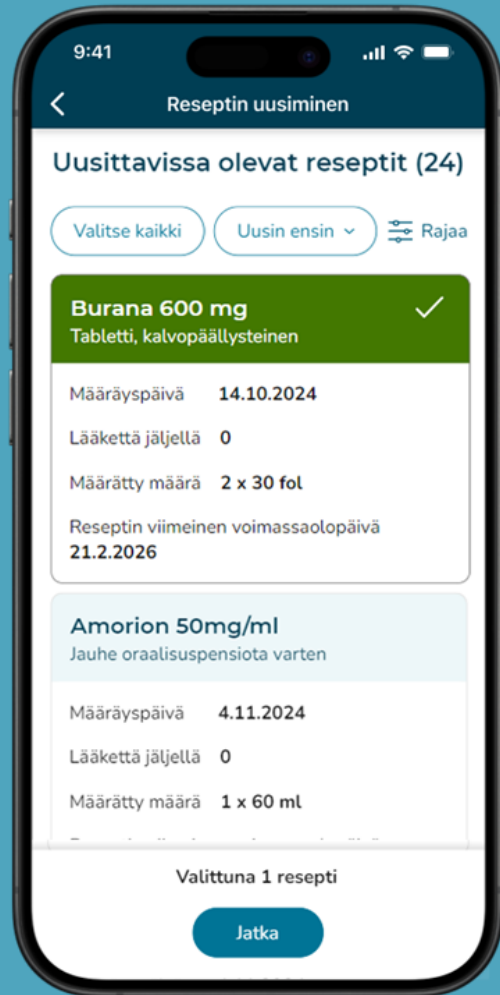
Sundhed.dk will continue their focus on improving the user experience of the national portal. Among the initiatives to reach this aim is a redesign of many of the features for the health personnel.

In Q1 a new project aimed at modernization the backend of sundhed.dk is expected to start. To ensure a stable and secure platform in the future, and make it easier to develop further on sundhed.dk

More solutions will also be released on Sundhed.dk, such as a new area on sundhed.dk for mental health, diagnoses and clinical guidelines.

On MinSundhed new solutions will be added, such as Organ donation, vaccinations and referrals.





Further development

- In June 2025 the first version of the MyKanta mobile app will be released.
- The transition to New MyKanta user interface (web browser) will be completed while the old interface is phased out in 2025.
- Social welfare services data will become available in MyKanta gradually during 2023–2026.

Further development

- In the first half of 2025, Helsenorge is focusing on improving existing services such as patient messaging with hospitals and enhanced appointment services. New services will also be introduced, including access to test results from a new national repository and a national solution for booking patient travel.
- Other priorities include expanding the use of Helsenorge by more specialists and physiotherapists, as well as improving functionality in the Helsenorge app through better data sharing.

HELSe
norge



1177



Further development

- Residents' Access Rights and Representatives
A new proxy function has been developed to align with updated regulations, allowing guardians to assist their minor children in accessing services that require login. The aim is to ensure digital inclusion by improving access rights management and enabling all residents to navigate and utilize e-services on 1177.se more effectively.
2025-2026
- Development of 1177 for Healthcare Professionals
The website will include a logged-in mode that integrates Inera's authenticated services. Through various types of integrations, 1177 for healthcare professionals will also be able to interact with regional operational systems, ensuring professionals have seamless access to the clinical knowledge support and tools they need.
2025 – and beyond

Questions or feedback?



The Norwegian Directorate of Health

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Methods used in the report

Different methods are used to measure user experience linked to portals:

Net Promoter Score (NPS):

- Net Promoter Scores are measured inside the portal (see NPS figures earlier) Net Promoter Score (NPS) is a tool to measure customers likelihood to recommend a company, a product, or a service to a friend or colleague.

(-100 - 0) : Bad

(0 - 30) : Good

(30 - 70) : Very good

(70 - 100) : Excellent

- Finland: Usage recommendation and the number of people who are familiar with MyKanta is based on electronic survey which was made by T-Media Oy (external research company).

Cookie policy:

- Sundhed.dk uses cookies to collect visitor statistics. GDPR compliant in which the user actively have to give consent, default to no to tracking. Around 50 % of the users accept the use of statistical cookies. Logins numbers are not affected by cookie, only aggregated count of numbers of logins.
- Kanta.fi: Cookies are used for collecting information about how and when the openly accessible kanta.fi web service is used. The MyKanta service gathers data about the number of logins and logouts. The personal identification data of the person logging in to the service is not gathered. Information about a person's behaviour or browsing history in MyKanta is not gathered, either.

Methods used in the report

To secure comparison across the countries, we describe the different metrics definitions here:

	Definition of «visits»	Definition of «Logins»
Norway	A visit (session) is the period of time during which a user actively uses Helsenorge. The session starts when the user opens the first page and ends when the page closes or when the user has been inactive for 30 minutes.	A login is counted every time a person logs in to Helsenorge. The person can log in several times during the same visit, and this is then counted as separate logins.
Sweden	A visit (session) is the period of time during which a user actively uses 1177.se. The session starts when the user opens the first page and ends when the page closes or when the user has been inactive.	A login is counted every time a person logs in to 1177.se. The person can log in several times during the same visit, and this is then counted as separate logins.
Denmark	A visit (session) is the period of time during which a user actively uses sundhed.dk. The visit starts when the user opens the first page, and ends when the user has been inactive for 30 minutes. If a user exit and returns to the site within 30 minutes, it will still count as one visit. Based on cookie consent, so only tracks the visits of users who actively consent to the use of statistical cookie. Note that traffic through mobile app requires log in and cookie consent. Due to changes in the logging of visits in 2023 figures for Denmark are less reliable than previous years.	A login is counted every time a person logs in to sundhed.dk. The person can log in several times during the same visit, and this is then counted as separate logins. Note that traffic through mobile app requires log in.
Finland	A visit (session) is the period of time during which a user actively uses kanta.fi (openly accessible web service). The session starts when the user opens the first page, and ends when the page closes or when the user has been inactive for 30 minutes. Cookie notifications changed on Kanta.fi in March 2023. Due to changes 2023 figures are not comparable to previous years.	A login is counted every time a person logs in to MyKanta to see personal data. The person can log in several times during the same visit, and this is then counted as separate logins.

The patient journal refer to notes that a doctor writes during a consultation, typically referred to as "clinical notes" or "medical notes." These notes contain observations, assessments, diagnoses, treatment plans, and other pertinent information related to the patient's health and the consultation.

An electronic health record (EHR) is a digital version of a patient's health information. It contains a patient's medical history, diagnoses, medications, treatment plans, immunization dates, allergies, radiology images, and laboratory test results, among other relevant healthcare information.

