

Priority Palliative Care Language for the UN NCD Summit Outcomes Document

(Prepared 17 July 2011)

Palliative care is a fundamental component of the prevention, treatment and care for people living with life-limiting illness including non-communicable diseases. Unfortunately it is a neglected area with approximately half the countries of the world having no palliative care services and 80% of the world's population has no or insufficient access to treatment for moderate to severe pain. This results in unnecessary suffering and distress for patients with NCDs and their carers. We must ensure that the outcomes document does not simply focus on prevention and treatment but also addresses care, including palliative care.

Add paragraph under section on “A rising epidemic and its socio-economic and developmental impacts”

To be added included within paragraphs 12-25. “Note with profound concern that millions of people affected by NCDs live and die with severe pain and other debilitating symptoms and can be effectively treated at low cost but do not have access to medicines, technologies and palliative care service.”

Under section on “Responding to the epidemic as a “whole-of-government” and a “whole-of-society” effort.”

To be included within paragraphs 26-33. “Acknowledge that severe pain in millions with NCDs can be easily treated if essential medicines as recommended by the World Health Organization were available, and that as highlighted in the annual reports of the International Narcotics Control Board in 2008 and 2009¹, access to opioid based medications is non-existent or almost non-existent in many countries and regions.”

Revise paragraph 30 that begins “Recognize that the impacts of NCDs can be largely prevented with a life-cycle approach to NCD prevention and control that incorporates cost-effective, low cost and feasible population wide interventions to address risk factors and primary health care **measures including palliative care** to treat and **care** for those who have or are at high-risk of contracting NCDs.”

Before section on strengthen national policies and health systems

Revise paragraph 33 that begins “Non-communicable diseases can be significantly reduced and prevented, with millions of lives saved. **In addition, untold suffering can be avoided by the provision for affordable pain relief and palliative care.** We therefore solemnly commit to:”

Under section on “Strengthen national policies and health systems”

¹ United Nations publication, Sales No. E.09.XI.1 and United Nations publication, Sales No. E.10.XI.1.

Revise paragraph 34 that begins “Establish and strengthen national policies and plans for the prevention and control of non-communicable diseases with the goal of reducing death rates by up to 2% per year, and notably strengthen national health systems, particularly at the primary health care level, by addressing gaps in health system components such as finance, governance, health workforce, health information, essential medicines and technologies and service delivery **to deliver evidence-based, affordable, and cost-effective interventions for NCDs including preventative, curative, palliative and rehabilitative services and health promotion activities.**”

For alternative language for paragraph 34, recommend the following edits related to palliative care:

Revise paragraph 34a (bis) that begins “Allocate sufficient budgetary resources for prevention, early detection, treatment, **and palliation of** NCDs, including related care and support.”

Revise paragraph 34f that begins “Give greater priority to prevention, early detection, diagnosis, treatment, **and palliation of** chronic diseases and rehabilitation and empowerment of persons with chronic diseases according to national plans; ... provide sustainable access to high quality safe, affordable, effective, and quality medicines, technologies, and behavioural interventions including through the development and use of evidence-based guidelines as well as through the revised WHO model list of essential medicines for the control of non-communicable diseases, efficient procurement and distribution of cost-effective and high-quality essential medicines in countries, establishment of viable and suitable financing options and promotion of the availability and promote the use of generic, cost effective essential medicines. Support should be given to the improvement of health in all especially to help the poorest segments of the population. All people should have access to treatment **and supportive care and** services on equal terms and without suffering economic hardship paying for them.

Revise paragraph 34f to include “Improve access to affordable, safe, cost-effective high quality medicines and diagnostics for prevention, treatment, **and palliation** for the integrated management of NCDs

Revise paragraph 35 that begins “Pursue a comprehensive approach to the strengthening of health systems that recognizes the importance of the life cycle approach to prevention is based upon primary health care that delivers effective and coordinated response for prevention, treatment, **and palliation** of NCDs, HIV, tuberculosis and other infectious diseases, sexual and reproductive health as well as maternal, newborn and child health

Revise paragraph 36 that begins **“Implement integrated and sustained** primary health care measures that enable and support low-cost, high impact essential interventions regarding health promotion, prevention and treatment, long-term care **and palliative care.**