

The Morphine Manifesto

A call for affordable access to immediate release oral morphine.

On the Occasion of World Cancer Day 2012

Pallium India,

International Association for Hospice & Palliative Care (IAHPC),
Pain & Policy Studies Group, Univ of Wisconsin / WHO Collaborating
Center for Pain Policy and Palliative Care (PPSG),

African Palliative Care Association (APCA),
American Cancer Society (ACS),

Argentine Program of Palliative Medicine - Foundation FEMEBA (PAMP-FF),
Asia Pacific Hospice Palliative Care Network (APHN),
Association for Palliative Medicine of Great Britain and Ireland (APM),

Cairdeas International Palliative Care Trust,
Centre for Palliative Care, Australia,
Centre for Palliative Care, Nigeria,

Danish Association for Palliative Medicine (DSPaM),
Eastern and Central Europe Palliative Care Task Force (ECEPT),
European Association for Palliative Care (EAPC)
(representing 48 national associations from 29 European countries),
European Society for Medical Oncology (ESMO),

Foundation for Hospices in Sub-Saharan Africa (FHSSA),
French Society of Palliative Care (SFAP),
German Association for Palliative Medicine,

Hellenic Society for Palliative and Symptomatic Care for Cancer
and Non Cancer Patients (HSPSCNCNP),
Help the Hospices (HtH),

Hong Kong Society for Palliative Medicine (HKSPM),
Hospice and Palliative Care Association of Nigeria (HPCAN),
Hospice of the Good Shepherd,

Hospice Palliative Care Association of South Africa (HPCA),
Hospice Unit, University College Hospital, Nigeria,
Human Rights Watch (HRW),

Hungarian Hospice Palliative Association (HHPA),
Indian Association for Palliative Care (IAPC),

Institute for Palliative Medicine at San Diego Hospice,
International Association for the Study of Pain (IASP),
International Children's Palliative Care Network (ICPCN),

International Network for Cancer Treatment and Research (INCTR),
International Observatory on End of Life Care (IOELC),
International Society of Nurses in Cancer Care (ISNCC),

Irish Association for Palliative Care (IAPC Irl), Italian Society of Palliative Care (SICP),
Kenya Hospices and Palliative Care Association (KEHPCA),
Latin America Association for Palliative Care (ALCP),

Latvian Palliative Care Association (PALL),
Lien Foundation,
LIVESTRONG,

Moroccan Society of Palliative Care,
Mozambique Palliative Care Association (MOPCA),
Norwegian Palliative Association (NPA),

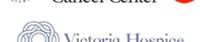
Pain Relief and Palliative Care Society - Hyderabad (PRPCS),
Palliative Care Association of Malawi, Palliative Care Association of Uganda,
Palliative Care Australia, Polish Society of Palliative Medicine (PTMP),

Portuguese Association for Palliative Care (APCP),
Qualy Observatory, WHO Collaborating Centre for Public Health Palliative Care Programs,
Catalan Institute of Oncology,

Romanian Palliative Care Association (ANIP),
Sobell House Hospice Charity, WHO Collaborating Centre for Palliative Care, Oxford,
Swedish Association of Palliative Medicine,

Swiss Association for Palliative Care, Tanzania Palliative Care Association,
Ukrainian League of Palliative and Hospice Care Development (LHPCDU),
Union for International Cancer Control (UICC) and,

University of Edinburgh - College of Medicine,
University of Texas M.D. Anderson Cancer Center,
University of Utah Pain Management Center,
Victoria Hospice and
Worldwide Palliative Care Alliance (WPCA),



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Considering that the 2011 United Nations political declaration on non-communicable diseases calls for member states to promote the use of affordable medicines, including generics, for palliative care;¹

Considering the World Health Organization's recommendation that essential medicines should be available to patients at all times and at a price the individual and the community can afford;²

Recognizing that morphine is the only strong opioid analgesic included in the WHO Model List of Essential Medicines;³

In the light of the available scientific evidence that immediate release oral morphine is both safe and effective as first-line treatment for severe pain;^{4;5}

Finding that immediate release oral morphine is less expensive for patients than sustained release morphine and most other strong opioid formulations;⁶

Aware that in many institutions, particularly in low and low-middle income countries, immediate release oral morphine is not available, while opioid formulations that are more expensive (or more difficult to use, such as injectable morphine) are available;

Considering that the high cost of opioids hinders access to treatment to the vast majority of patients in many low and low-middle income countries, resulting in millions of patients suffering needlessly with untreated pain;

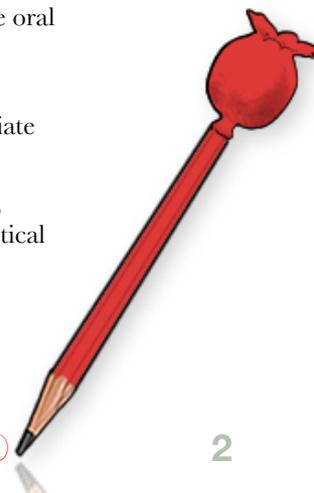
Recognizing that the low profit margin typically realized from selling immediate release oral morphine is often made worse by the additional costs of unnecessarily burdensome regulatory requirements, which may further deter the pharmaceutical industry from supplying immediate release morphine,

DECLARE that denial of adequate pain treatment to significant numbers of patients violates the right to the highest attainable standard of physical and mental health, as articulated in article 12 of the International Covenant on Economic, Social and Cultural Rights,⁷ and may violate the prohibition of cruel, inhuman, or degrading treatment⁸ as articulated in article 7 of the International Covenant on Civil and Political Rights;⁹ and

DECLARE that the exclusive availability of sustained release morphine and other expensive or injectable opioid formulations hinders access to an essential health service, leading to poor clinical and public health practice.

WE CALL UPON GOVERNMENTS, PHARMACEUTICAL INDUSTRY AND HEALTH CARE INSTITUTIONS to guarantee the accessibility of immediate release oral morphine to patients in need at a cost that the individual and community can afford. In particular:

- Governments should ensure that immediate release oral morphine is always available in public healthcare institutions before other more expensive opioid formulations become available. Where more expensive or injectable opioid formulations are already available and immediate release oral morphine is not, they should take immediate steps to ensure that it becomes available.
- Governments should work collaboratively with private healthcare institutions and the pharmaceutical industry to ensure the widest possible availability and accessibility of immediate release oral morphine in the private healthcare system.
- Governments should minimize the impact of regulatory requirements on the manufacturing, importation, exportation and distribution of opioid analgesics and work with the pharmaceutical industry to facilitate the availability of immediate release oral morphine.



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Reference List

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- (2) World Health Organization. Essential medicines (website). 2005; Available from: http://www.who.int/topics/essential_medicines/en/. Accessed October 10, 2011.
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- (4) Hanks GW, De Conno F, Cherny N et al. Morphine and alternative opioids in cancer pain: the EAPC recommendations. *British Journal of Cancer* 2001;84:587-593.
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- (9) United Nations General Assembly. The Universal Declaration of Human Rights. Adopted at the 181st U.N. General Assembly plenary meeting by Resolution 217 A (III), 10 December 1948; Paris, France. 1948. <http://www.un.org/en/documents/udhr/index.shtml>, United Nations.

READ & SIGN THE MORPHINE MANIFESTO ONLINE AT

palliumindia.org/manifesto

