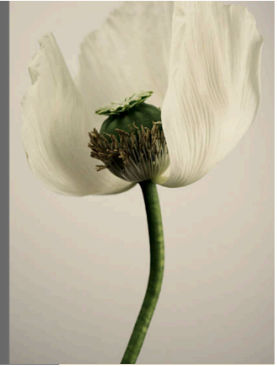


The Morphine Manifesto 2023



WE, CIVIL SOCIETY ORGANISATIONS FROM ACROSS THE WORLD,

CALL FOR SAFE ACCESS TO IMMEDIATE RELEASE ORAL MORPHINE
FOR ALL WITH A MEDICAL NEED,

Considering the recommendation of the World Health Organization (WHO) that essential medicines should be available to patients at all times and at a price the individual and the community can afford [1] and that morphine has been listed in the WHO Model List of Essential Medicines since 1977[2];

Recognizing that morphine is included in the schedules of the three international drug control conventions, making availability a responsibility of states that are parties to the treaties [3];

Acknowledging the series of resolutions adopted by the UN Commission on Narcotic Drugs, the UN General Assembly, and the recommendations listed in Chapter Two of the 2016 UNGASS Outcome Document on the World Drug Problem to help member states improve access to internationally controlled substances for medical and scientific purposes while preventing diversion and non-medical use [4];

Recalling the body of scientific evidence supporting prescription of immediate release oral morphine as a safe and effective first-line treatment for severe pain when prescribed by trained healthcare practitioners [5];

Aware that industry subsidies and promotions in some low- and middle-income countries (LMICs) have made expensive opioids or those with specific indications, such as sustained release morphine or transdermal fentanyl available while inexpensive and widely applicable immediate-release oral morphine remains inaccessible;

Considering that the marketing and distribution of brand-name, expensive opioids over cost-effective generic formulations of immediate-release oral morphine, hinder access to pain relief for the vast majority of patients in LMICs, and that patients and families who purchase them experience increased financial toxicity;

Observing from best practices in a handful of LMICs, that immediate-release oral morphine is significantly less expensive for patients than sustained-release morphine and most other strong opioid and non-generic formulations;

Recognizing that morphine's low profit margin combined with unduly burdensome regulatory requirements further deter the pharmaceutical industry from supplying immediate-release morphine at an affordable price;

Reiterating multiple UN agency findings that 50% of the global population (3.6 billion people who reside in the world's poorest countries) receive less than 1% of the global distribution of morphine; [6], [7];

Citing the 2023 WHO publication, 'Left Behind in Pain' which found that 50% of survey respondents from LICs and 18% from LMICs report that at least 8 in 10 people do not receive morphine or any other strong opioids despite medical need [8];

Considering that the 2014 WHA 67.19 resolution on palliative care states that provision of palliative care and pain relief is an ethical responsibility of health systems, and that access to essential medicines such as morphine is necessary for realization of the right to the enjoyment of the highest attainable standard of physical and mental health [9];

DECLARE

That it is unethical for governments to support distribution of sustained-release morphine and expensive opioid formulations if generic immediate-release oral morphine is inaccessible for persons of all ages with medical need, and

That failure to ensure safe accessibility of adequate pain treatment violates the right to the highest attainable standard of physical and mental health, as stipulated in The WHO Constitution and furthermore, that it violates the right to be free from cruel, inhuman or degrading treatment or punishment as articulated in Article 7 of the International Covenant on Civil and Political Rights^o and the Convention Against Torture [10] and

AND CALL UPON

THE GOVERNMENTS, HEALTHCARE INSTITUTIONS AND PROVIDERS OF ALL UN MEMBER STATES to ensure the safe accessibility of immediate-release oral morphine to patients in need in their preferred place of care in accordance with the recommendations of the International Narcotics Control Board, the UN Office of

Drugs and Crime, the World Health Organization, the Human Rights Council, and Chapter 2 of the 2016 UNGASS Outcome Document by initiating processes to

- identify and revise regulations that unduly restrict access by prescription to internationally controlled essential medicines; and
- ensure that immediate-release oral morphine is always accessible in public healthcare institutions before approving the marketing of other more expensive opioid formulations. Where more expensive opioid formulations are already available and immediate-release oral morphine is not, competent authorities should act to ensure accessibility;
- provide adequate training for prescribers to ensure safe prescribing practices.

This **MORPHINE MANIFESTO**, created by **PALLIUM INDIA**, in collaboration with the **INTERNATIONAL ASSOCIATION FOR HOSPICE AND PALLIATIVE CARE**, is endorsed by the following organisations and institutions:

Academia Nacional de Cuidados Paliativos, Brazil

African Centre for Research for End of Life (ACREOL)

African Organisation for Research and training in Cancer (AORTIC)

African Palliative Care Association (APCA)

Asia Pacific Hospice Palliative Care Network (APHN)

Asociación Alianza Boliviana de Cuidados Paliativos, Bolivia

Asociación Argentina de Medicina y Cuidados Paliativos (AAMyCP), Argentina

Asociación Colombiana de Cuidados Paliativos (ACCP), Colombia

Asociación Medicina del dolor y cuidado paliativo (MEDOPAL), Chile

Association for Palliative Medicine of Great Britain and Ireland (APM)

Australasia Palliative Link International (APLI)

Cachar Cancer Hospital and Research Centre

Cairdeas International Palliative Care Trust, Scotland

Cancer Aid Society, India

Cancer Association of South Africa

CanSupport, India

Carmel Care & Relief Foundation

Center of Palliative Medicine, Kharkiv National Medical University, Ukraine

Colombian Palliative Care Association (ASOCUPAC)

Ecuadorian Association of Palliative Care

Elisabeth Kübler-Ross Foundation

European Association for Palliative Care (EAPC) (representing 48 national associations from 29 European countries)

Fundacion de Medicina Paliativa (PALIAMED), El Salvador

General Hospital Khonsa, District : Tirap Arunachal Pradesh, India

Hospice & Palliative Care Association of Nigeria (HPCAN)

Hospice Burkina, Burkina Faso

Indian Association of Palliative Care (IAPC)

Indian Cancer Society

Indira Gandhi Cooperative Hospital

Institute of Palliative Medicine (IPM), India (WHOCC for Community Participation in Palliative Care & Long Term Care)

International Children's Palliative Care Network (ICPCN)

Latin America Association for Palliative Care (ALCP)

Life Care Foundation, India

NATCO Cancer Center and GGH, Guntur, India

National Association of Palliative Care for AYUSH & Integrative Medicine (NAPCAIM), India

National Cancer Grid, India

National Hospice and Palliative Care Council of the Philippines

Near North Palliative Care Network (NNPCN), Canada

Pain Relief and Palliative Care Society (PRPCS), India

Palliative Care Association of El Salvador

Palliative Care Association of Malawi

Palliative Care Association of Uganda

Palliative Care for Children South Africa (PatchSA)

Palliative Care in Humanitarian Aid Situations and Emergencies (PallCHASE)

Pallium India Inc., USA

Peruvian Society of Palliative Care

Philippine Society of Hospice and Palliative Medicine

Pontifical Academy for Life, Vatican

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Regional Clinical Center of Medical Rehabilitation and Palliative Care, *Hippocrates*, Ukraine

Ruth Foundation, Philippines

Sangwari, India

Sebastian Indian Social Projects (SISP)

Sirumalai Health Center, India

Snehaanchal, India

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Starlight Oasis of Hope, Lesotho

Tómatelo a Pecho, Mexico

Worldwide Hospice Palliative Care Alliance (WHPCA)

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