

**Advocacy for Palliative Care in Africa: A
Focus on Essential Pain Medication
Accessibility**

**Regional Drug Access Workshop
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Oral Morphine in Nigeria

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NIGERIA

- The most populated country in Africa – population 130 million
- Federal Republic, comprising 36 states plus the Federal Capital Territory of Abuja.
- Each state has a House of assembly and an elected Governor, who appoints an executive council.
- Health agenda/budget at central Federal/State levels
- Low MDGs despite oil wealth!



Opioid Analgesics in Nigeria- Role of NAFDAC

- National Agency for Food and Drug administration and Control (NAFDAC) mandated- 1993 decree to:-
 - * Ensure use of narcotics and psychotropic drugs limited to medical and scientific purposes
 - * grant authorizations for importation, manufacture, distribution, sale and use of narcotic drugs and substances.
 - * Collaborate with NDLEA on measures to eradicate drug abuse

Opioid Analgesics in Nigeria- Role of FMOH

- **The Federal Ministry of Health is sole importer of finished narcotic drugs for the nation's legitimate medical and scientific purpose**
- **Quantity to be imported depends on national consumption estimate prepared by NAFDAC in line with INCB guidelines**
- **Drugs stored in Central Federal Medical stores, Oshodi, Lagos**
- **Legitimate institutions normally apply to Narcotic control division, NAFDAC for purchase. Endorsements required.**
- **If satisfied, authorization issued to purchase from Federal Medical stores**

Opioid Analgesics in Nigeria

- **Supply erratic since 1993 – mainly due to government bureaucracy (DF118, tramadol, pentazocine available)**
- **Advocacy efforts (UCH Pain/Palliative care group, Society for the Study of Pain, Nigerian Society of Anaesthetists, David Joranson).**
- **New NAFDAC Director- Prof Akunyili**
- **December 2001- parenteral opioids import**
- **September 2004 – Supply expired. No new supply!**

Arrival of opioids!

- **Continued Advocacy to NAFDAC, FMOH (APCA- Anne Merriman, Dr Jagwe, Palliative care initiative, Nigeria, UCH)**
- **August 2005 – New supply including morphine powder in country**
- **January 2006 – UCH pharmacy accessed supply from National store**
 - * **Inj. Pethidine, morphine, fentanyl, dihydrocodeine, tabs Pethidine, morphine powder**

Oral Morphine

- **March 2006- Workshop on safe use of opioids for doctors and nurses (PCIN/UCH)**
 - * **Regulations, Pain assessment, Drug pharm, procurement, prescription, admin, dispensing, storage, complications and monitoring of use**



Oral Morphine use

- **March 2006 - Morphine solution prepared and dispensed in UCH by pharmacists- 1mg/ml (50mg/5ml) BPC prep.**
- **Only Doctors prescribe**
- **Prescription for Cancer patients in UCH-289 by June**
- **Cost -150 Naira for 100mls(cost of a loaf of sliced bread)**
- **??? Use in other hospitals**
- **Replication of workshop countrywide through SSPN**



Initial Problems

- **Opioid naive patients**
- **Prescriptions by untrained doctors**
- **Lack of knowledge of staff/resistance to change**
- **Fears and misconceptions (staff, patients, carers)**
- **Poor/No Monitoring**
- **Side effects -Vomiting, constipation discourage patients**

Future Plans

- **Centre for Palliative care, Nigeria (former PCIN)-**
 - *Continued advocacy and education- Continued supply
 - *Home based palliative care program commenced
 - *Collaboration with other stake holders nationally and establish a National Palliative Care Association
 - * Collaboration with international organizations (including twinning possibility)



Conclusion

- **Nigeria is a huge country where 70% of cancer patients present late in hospital**
- **Has one of the highest number of PLWAs in Africa with poor access to treatment**
- **Huge need for effective pain management and palliative care services**
- **HELP required: Education (and practical training), Drug availability, Government policy issues.**

Centre for Palliative care, Nigeria

- Former Palliative care initiative, Nigeria
- Now registered as NGO
- Mission
To promote quality of life for patients with life limiting illnesses (including cancer and HIV/AIDS) and their families through education and training, advocacy for availability of essential drugs, psychosocial and spiritual support.

THANK YOU for supporting our efforts!

