



May 15, 2018

IAHPC Comment on High Level Commission on NCDs Draft Report:

The International Association for Hospice and Palliative Care (IAHPC) congratulates the World Health Organisation (WHO) for its efforts to improve policies on prevention and treatment for Non Communicable Diseases (NCDs) in its Draft First Report.

However, we are concerned about the lack of reference to palliative care as an essential service for persons suffering from NCDs, despite the Draft Report's many references to millions of "premature deaths" in all regions of the world. Palliative care (PC) helps relieve Severe Health Related Suffering (SHS) by providing physical, psycho-social, and spiritual care to patients and their families. It aspires to relieve "total pain" by shifting the often overly technical modern medical model to a holistic person-centered model of care especially when prevention, treatment, and rehabilitation are no longer effective.

The vast majority of the NCD deaths cited in the Draft Report are now, and will be for the foreseeable future, characterised by severe preventable pain and suffering as a result of lack of palliative care provision at all levels of the healthcare system. The global abyss that describes lack of access to internationally controlled palliative care medicines such as morphine, in most countries, and the lack of trained healthcare personnel to prescribe those medicines and care for people living through all types and stages of NCDs, is a public health scandal of global proportions.¹

In order to reflect the current global health consensus on the need to integrate palliative care as an essential service under UHC, the next iteration of the DRAFT REPORT should reference the findings of the (2017) Lancet Commission Report, "Alleviating the Abyss in Palliative Care and Pain Relief".² Estimates of unmet PC needs worldwide range from around 26.8 million per year, to more than 75 million when family and caregivers are included in those experiencing the effects of severe health related suffering.

NCDs cause 70% of all global deaths and generate 93% of adult palliative care (PC) need, which nearly 80% of the global PC need in low-to-middle income countries.

¹ ESMO Press Release 2013 <http://www.esmo.org/Press-Office/Press-Releases/ESMO-Press-Release-Untreated-Cancer-Pain-a-Scandal-of-Global-Proportions-Survey-Shows>

² Lancet Commission on Palliative Care and Pain Relief Study Group Alleviating the access abyss in palliative care and pain relief-an imperative of universal health coverage: the Lancet Commission report. Knaul FM, Farmer PE, Krakauer EL, et al (eds). Lancet. 2018 Apr 7;391(10128):1391-1454 <https://www.thelancet.com/commissions/palliative-care>



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The aging of the global population, combined with the increased prevalence of NCDs and the persistence of other debilitating chronic and infectious diseases, reflects an increase in need for PC provision for which the majority of the world's healthcare systems are unprepared. In fact, studies estimate that by 2040, the proportion of people worldwide in need of PC will increase from 25% to 47%.³

Recognising this growing need, the WHO Executive Board recently approved the 13th General Program of Work acknowledging the "limited availability of [PC] services in much of the world and the great avoidable suffering for millions of patients and their families" and concluded with several recommendations for further PC development and support for global PC advocacy campaigns. Though research has shown that PC has steadily grown at the global level, the demand far outstrips supply, and this growth has been very uneven, with some countries having progressed very little over the past decade.

It is imperative that reports such as the DRAFT produced by the High Level Commission on NCDs, reinforce the need to develop and integrate palliative care into public health systems under Universal Health Coverage as per the Agenda 2030 for Sustainable Development, Goal 3, Target 3.8.

Sincerely,

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³ Etkind SN, Bone AE, Gomes B, et al. How many people will need palliative care in 2040? Past trends, future projections and implications for services. *BMC Med* 2017;15(1):102.