



Shameful statistics of pain

→ Kathy Redmond ■ EDITOR

In early March the International Narcotics Control Board (INCB), a UN agency, issued its annual report highlighting – yet again – the plight of millions of people around the world who continue to suffer acute and chronic pain because of insufficient use of analgesics.

How can this still be happening, nearly a quarter of a century after the World Health Organization made a concerted effort to promote pain relief with the launch of its simple strategy, the ‘three-step analgesic ladder’?

It’s not all bad news – global consumption of opioids has more than doubled over the past decade. However, this has occurred mainly in Europe and North America. In 2006 these two regions, which contain less than 20% of the world’s population, accounted for 89% of the global consumption of morphine. Even here, the picture is far from perfect. A survey of nearly 5,000 cancer patients conducted last year in 11 European countries found that one in two patients suffer moderate to severe pain, while more than 10% of those surveyed indicated that their pain is sometimes so bad that they want to die (see www.paineurope.com). What must life be like for cancer patients in the developing world?

Inadequate knowledge and skills in pain management are partly to blame, but so are regulatory impediments and

economic constraints. Irrational and entrenched fears about the risk of opioid addiction among patients and professionals alike also play a role.

Opioids such as morphine are not exorbitantly expensive and should be used, as appropriate, in all cancer patients who need them. Given all the technological and scientific advances we can draw upon, it seems barbaric that anyone should be left to live with unrelenting pain or die screaming in agony.

This is an issue of basic human rights. Governments have a moral responsibility to ensure that all their citizens can access appropriate pain control, by identifying and addressing national impediments to state-of-the-art pain management, including overly bureaucratic regulations governing the prescription of opioids.

Health professionals also have a moral responsibility to equip themselves with the knowledge and skills they need to manage pain effectively. Anything less would be a dereliction of duty.

A major effort will be required if we are to turn around the picture of pain management presented in future INCB reports. But it has to be made, to ensure that the many millions of people diagnosed with cancer in years to come aren’t forced to face the excruciating and life-sapping pain that is the reality for huge numbers of cancer patients today.