

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;[\[6\]](#),[\[7\]](#)

Acknowledging the publication of the 2023 WHO report, 'Left Behind in Pain' which documents that at least 8 in 10 people with medical need do not receive morphine or any other strong opioids[\[8\]](#);

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;
- 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, institutions and individuals:

Special thanks to **Dr. Eric L. Krakauer**, MD, PhD, Director, Program in Global Palliative Care, Associate Professor of Medicine, Harvard Medical School, Boston, USA for his contributions to the Morphine Manifesto.

REFERENCES

[1] WHA67.22 Resolution on 'Access to essential medicines'

https://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_30-en.pdf

[2] WHO. The selection of essential drugs. Geneva. 1977

<https://list.essentialmeds.org/files/trs/sC1L9lb4l8o8cDqlyfhnKyoa8MGm7XUFDffFVNUc.pdf>

[3] https://www.unodc.org/unodc/en/commissions/CND/Mandate_Functions/Scheduling.html

[4] <https://www.unodc.org/documents/postungass2016/outcome/V1603301-E.pdf>

[5] WHO guidelines for the pharmacological and radiotherapeutic management of cancer pain in adults and adolescents.; World Health Organization; 2018. Available from: <https://www.who.int/publications/i/item/9789241550390>.

[6] Bhadelia A, De Lima L, Arreola-Ornelas H, Kwete XJ, Rodriguez NM, Knaul FM. Solving the Global Crisis in Access to Pain Relief: Lessons From Country Actions. *Am J Public Health*. 2019 Jan;109(1):58-60. doi: 10.2105/AJPH.2018.304769. Epub 2018 Nov 29. PMID: 30495996; PMCID: PMC6301382.

[7] Knaul FM, Farmer PE, Krakauer EL, et al Alleviating the access abyss in palliative care and pain relief—an imperative of universal health coverage: the Lancet Commission report. *The Lancet*, Volume 391, Issue 10128, 1391 - 1454

[8] 'Left Behind in Pain' <https://iris.who.int/bitstream/handle/10665/369294/9789240075269-eng.pdf?sequence=1>

[9] Resolution WHA67.19 on Strengthening of palliative care as a component of comprehensive care throughout the life course. https://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_R19-en.pdf

[10] https://www.hr-dp.org/files/2013/09/22/A.HRC_10_44AEV_1.pdf