

Pain & Policy Studies Group • International Pain Policy Fellowship



NIGERIA

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Former President, Society for the Study of Pain Nigeria, 2005-09



For further information on Nigeria:

<http://www.painpolicy.wisc.edu/country/profile/nigeria>

BACKGROUND:

Prior to 2006, the availability of oral morphine in Nigeria was sporadic, with frequent stock outs occurring. When oral morphine was available, the majority of the stock was concentrated in large cities because of poor infrastructure, regulations, fear of diversion and lack of funding. Patients and their families were unable to travel to the main cities for treatment due to costs or logistics.

FELLOWSHIP SUCCESSES:

A key component of Dr. Amanor-Boadu's Action Plan was to decentralize the morphine supply from the main city of Lagos to rural areas of Nigeria.

In 2007, the National Agency for Food and Drug Administration Control (NAFDAC) became interested in removing this barrier to opioid accessibility by setting up a system to facilitate the distribution of opioids closer to patients. Dr. Amanor-Boadu took part in developing and planning a pilot project to demonstrate that opioids could be transported safely throughout Nigeria. By the end of her fellowship in 2008, she reported government plans to establish supply centers in 6 of the country's 12 states.

ONGOING PROGRESS:

Before implementing the pilot project, NAFDAC planned to train the 6 states' head pharmacists and physicians on the "Safe Use of Opioid Analgesics," including instruction in narcotics control procedures. The training got under way in 2009 with Dr. Amanor-Boadu's involvement, thanks to contacts she had made during her fellowship. In 2009, unfortunately, the decentralization project ran out of money and was put on indefinite hold. The scarcity of opioids persisted.

In 2012, the American Cancer Society initiated a project in Abuja, the capital, to improve access to oral morphine in Nigeria. Dr. Amanor-Boadu was interviewed as part of that project and monitored their efforts to get opioids into the country. In 2015, the American Cancer Society launched another project in Nigeria, the Pain-free Hospital Initiative, and Dr. Amanor-Boadu is involved in this at the local level in her hospital.

In 2014, Dr. Amanor-Boadu was involved in a UNODC-supported initiative to support Nigeria's response to drugs and related organized crime, but which also had a significant focus on access to controlled medicines. In June 2015, resulting from this initiative, Nigeria launched their [National Drug Control Master Plan \(NDCMP\) 2015-2019](#), which provides an integrated and comprehensive solution to a range of drug related issues, in line with international drug control conventions. One of the plan's four pillars is access and control of narcotics and psychotropic substances for medical and scientific purposes, including objectives to improve the distribution of opioids throughout the country.

Dr. Amanor-Boadu continues to give lectures at conferences about opioid availability in Nigeria.

CHALLENGES AND FUTURE NEEDS:

While the government of Nigeria has made great strides in improving access to opioids, there is still a need for ongoing implementation and monitoring of the progress to improve access.



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