BACKGROUND:

In a country of more than 20 million, with 15,000 to 20,000 new cancer cases a year—most of those cases advanced — there is a great need for palliative care in Sri Lanka. Therefore expansion of palliative care was a priority in the Sri Lankan setting. Therefore the fellowship was a timely opportunity to work with the internal & external stakeholders to identify the service needs in relation to availability of pain medications for cancer pain. Oral morphine and other strong opioids were available in Sri Lanka; yet, there were challenges with consistency of the supply and distribution of the medications throughout the country.

Two Fellows were selected from Sri Lanka: (1) Dr. N. Jeyakumaran, a Consultant Clinical Oncologist, attached to the National Cancer Institute of Sri Lanka, who was working with the Sri Lanka College of Oncologists to develop Palliative Care for cancer patients before signing up for the fellowship and (2) Dr. Perera, a Consultant Community Physician working at the National Cancer Control Programme (NCCP), Ministry of Health (MoH), Sri Lanka – an expert in national policy development, planning, implementation, monitoring and evaluation of prevention & control of cancers.

FELLOWSHIP SUCCESSES:

One of the IPPF objectives for the Fellows was for palliative care to become a priority in the cancer related policies in Sri Lanka. To achieve this, both fellows worked with the other stakeholders. As a consultant to the NCCP, Dr. Perera was instrumental in the policy development process and ultimately, palliative care for cancer patients was added as an important policy objective in the National Policy and Strategic Framework on Prevention and Control of Cancer. An identified major activity within this objective is to “Ensure availability of drugs” which recognizes the need to amend the existing relevant legislation regarding availability and prescription practices mentioned in the National Dangerous Drug Control Act.

Both Drs. Jeyakumaran and Perera worked with the other stakeholders in identifying specific provisions that were potential barriers to opioid prescribing. In 2015 the Director General of Health Services issued a circular allowing oncology & pain clinics to prescribe morphine for one month duration as an important intervention.

A draft national pain management guideline for cancer patients was developed with the participation of relevant experts. The draft guideline was submitted to the experts for the observations. It will be among medical officers in early part of year 2016.

Simultaneously, efforts are underway to expand palliative care services throughout the country and educate health professionals about pain relief and the rational use and safe handling of essential controlled medicines. Community based palliative care pilot programmes are being conducted in four districts.

Important efforts to educate and train health workers about palliative care are in progress:

- Two palliative care courses were included in the post graduate diploma program for family medicine & elderly medicine
- A master trainer program on Palliative Care was initiated to develop capacity & leadership in palliative care in Sri Lanka (this was a joint effort among the Asia Pacific Hospice & Palliative Care Network, National Cancer Institute,
A post graduate diploma on palliative care was approved by the Ministry of Health and the Post Graduate Institute of Medicine (PGIM.) A core group on curriculum development was appointed by the Director of the PGIM and regular meetings are being conducted to produce a curriculum.

Discussions were initiated with the Director of Nursing Training regarding the inclusion of palliative care in the nursing curricula as well as including training modules on palliative care nursing in the basic nursing training curricula.

ONGOING PROGRESS:

In an effort to improve the distribution of opioids throughout the country, both Fellows engaged with the Medical Supplies Division to learn about the distribution of opioids and where there might be inconsistencies in supply. Furthermore, they are preparing a questionnaire to assess the availability of morphine and pain medications at cancer treatment centers and district general hospitals in Sri Lanka.

CHALLENGES AND FUTURE NEEDS:

Despite progress to raise awareness about palliative care in Sri Lanka, some challenges remain:

- Even though information on distribution of morphine at central level was obtained, the distribution and availability of morphine at provincial cancer treatment centers could not be evaluated due to limitations of time and other logistical issues. The Fellows planned to continue working towards this objective.
- The National Dangerous Drugs Control Act still needs to be amended in order to remove the obstacles to access to pain medications in Sri Lanka.
- The National Working Group for Palliative Care for Cancer Patients was established in 2014 under the leadership of Director General of Health Services. As palliative care expands beyond cancer, identifying a national level coordinating body to look into a holistic approach will be a challenge in the era of competing health priorities.