

# Pain & Policy Studies Group • International Pain Policy Fellowship



ARMENIA

**Hrant Karapetyan, MD, PhD**

Fellow 2008-2010

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Association



For further information on Armenia:

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

## BACKGROUND:

Prior to the Fellowship, oral morphine was not registered in the country and was not available. Injectable morphine was available, but rarely used and very expensive. There was a cumbersome prescribing process for injectable morphine and an equally challenging procedure for filling out-patient prescriptions. Furthermore, palliative care services were not widely available and none of the Armenian medical institutions had any core courses on pain treatment.

Two Fellows were selected to represent Armenia: 1) Dr. Karapetyan, an Oncologist who served as the President of the Armenian Pain Control & Palliative Care Association and 2) Dr. Kazaryan, a Pharmacist at the National Institutes of Health. Both fellows had strong ties to the Ministry of Health (MoH) and unique qualifications in their respective fields.

## FELLOWSHIP SUCCESSES:

Early in the Fellowship in 2008, Drs. Karapetyan and Kazaryan attended the "Workshop on Assuring Availability and Accessibility of Opioid Analgesics for Pain and Palliative Care," in Chisinau, Moldova. At this workshop, another Action Plan was developed by the Armenian team that updated the one that was drafted in Madison. It was believed that this redefinition of problems, objectives, and action steps would allow each of the Armenian Fellows to achieve progress while working separately on various aspects of these problems, so that they each could take advantage of their own professional networks, expertise, and work-styles.

Dr. Karapetyan was instrumental in pulling together stakeholders from the government and non-governmental organizations for several meetings to discuss the issues of palliative care and availability of opioids in Armenia. These meetings led to the formation of a task force under the National Assembly's Committee on Health Protection and Social Problems, whose goal was to consider the legal challenges impacting opioid availability and the need for palliative care public awareness and training programs.

In 2009, thanks largely to Dr. Karapetyan's leadership, the ribbon was cut at the country's first palliative care center. The Center has three departments: pain & symptomatic care (8 beds), hospice (7 beds), and a mobile team for palliative care at home. This is the first entity of its type in Armenia.

Also in 2009, the government of the Republic of Armenia passed Resolution #1381/N to the health services law to include palliative care in the list of medical services provided in Armenia. This Resolution was very important in that it served as a starting point for the legalization of the entire palliative care system in Armenia.

Working with his mentor, Dr. Stephen Connor, and other colleagues, Dr. Karapetyan made initial progress to register oral morphine and identify a supplier. He was involved in numerous meetings and by the time the fellowship concluded, the process for registering oral morphine and oxycodone was underway.

## ONGOING PROGRESS:

The efforts of Drs. Karapetyan and Kazaryan, working with colleagues and mentors, have contributed to an improved environment for palliative care and opioid availability. As a result, the government of Armenia has recognized the need for palliative care and taken some important initial steps to develop it. In addition to including palliative care in the government's list of recognized medical services, it established a palliative care working group, and developed a national strategy for implementing palliative care. Furthermore, between 2011 and 2013, the authorities ran four palliative care pilot projects.

Dr. Karapetyan reported—as do almost all Fellows—that the assistance of his IPPF mentor, Open Society Institute international palliative care consultant Stephen Connor, could “not be overestimated.” Each of his visits pushed progress a giant step forward. “During Stephen Connor’s last visit to Armenia I organized his meeting with the Head of Health Care and Social Problems Commission of the [Republic of Armenia] Parliament Prof. A. Babloyan,” wrote Dr. Karapetyan in his final report. Within days the professor called the doctor to inform him of the new resolution’s passage.

## CHALLENGES AND FUTURE NEEDS:

Many challenges remain in Armenia. In a 2015 report by Human Rights Watch, several continuing obstacles to effective pain treatment in Armenia were identified:

- Lack of oral morphine,
- Restrictive laws requiring a complex, time-consuming process for prescribing injectable opioids,
- Inadequate dosages of injectable morphine prescribed as the standard practice,
- Onerous procedures for filling prescriptions that must be repeated nearly daily because in practice doctors prescribe only enough injectable morphine to last 24 or 48 hours,
- Tight police control, including oncologists providing written monthly reports to the police with details on the identity and diagnosis of patients who receive opioids.

## PUBLICATIONS:

- Dzotsenidze P, Kazaryan I, Karapetyan H, Cleary J, Ryan K, Maurer M, Improving the Availability and Accessibility of Opioid Analgesics in Armenia and Georgia, *European Journal of Pain* 2009; S1: S216b–S216.
- Human Rights Watch. “All I Can do is Cry,” Cancer and the Struggle for Palliative Care in Armenia, 2015. [https://www.hrw.org/sites/default/files/report\\_pdf/armenia0715\\_4up.pdf](https://www.hrw.org/sites/default/files/report_pdf/armenia0715_4up.pdf)



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