



## ***FIND OUT WHAT LIFE ASKED DEATH IN FILM DEBUT ON WORLD HOSPICE & PALLIATIVE CARE DAY IN MYANMAR***

***Documentary reveals the challenges and triumphs of bringing palliative care<sup>1</sup> to Myanmar and Asia & how pain relief eludes the dying***

***Living and dying in pain: it doesn't have to happen***

**YANGON, OCTOBER 8, 2016** – Myanmar, a country with a population of 54 million people, has made strides in the development of palliative care despite the difficulties it faces. Oral morphine is being made available by the government of Myanmar. Several doctors have enhanced their palliative care skills and knowledge through attending overseas training programmes. Key government institutions like Yangon General Hospital, Mandalay General Hospital and the No.2 Military Hospital, which are in the process of building up their palliative care services, will become the teaching centres in palliative care in the future.

Viewers will see Myanmar's positive developments in palliative care in a 26-minute documentary, [LIFE ASKED DEATH](#), premiering here and online on Oct 8 in conjunction with **World Hospice and Palliative Care Day**. The film was shot in **Myanmar, Bangladesh and Sri Lanka** and is a project of the **Lien Collaborative for Palliative Care**, a joint initiative of the [Lien Foundation](#)<sup>2</sup> and the [Asia-Pacific Hospice Palliative Care Network](#) (APHN).<sup>3</sup>

**Myanmar's Director General of the Department of Medical Services, Ministry of Health, Prof Myint Han, and Chief Minister of Yangon Region, U Phyo Min Thein, are among the many VIPs and special guests who will grace the premiere at the auditorium of the University of Nursing's Main Campus in Yangon on 8 October 2016. Prof Dr Khin Myo Hla, President of the Myanmar Society for the Study of Pain, Prof Dr U Myo Nyunt, President of U Hla Tun Hospice (Cancer) Foundation, Prof U Myint Thaug, Patron of the Myanmar Society for the Study of Pain, will also attend.**

---

<sup>1</sup> Palliative Care is an approach, a way of delivering services that cares for the patient as a whole person, addressing the physical, emotional and spiritual needs and practical concerns, of both the patient and the family. It aims to improve the quality of life of a patient facing a life-threatening illness and that of his family.

<sup>2</sup> The Lien Foundation is a philanthropic house in Singapore which works in the areas of water and sanitation, early childhood education as well as ageing and palliative care.

<sup>3</sup> The APHN is a charitable non-governmental organisation registered in Singapore in 2001 which supports the development of palliative care in the Asia Pacific region. The charity's mission is to promote access to quality hospice palliative care for all in the Asia Pacific region. APHN members include some 230 organisations that support or provide palliative care and over 1,300 individuals working in the field in the Asia Pacific region.

Complementing the film screening is a photo exhibition at the same venue, underscoring the urgency for countries to integrate palliative care into their existing healthcare systems and remove barriers to pain relief medications. The exhibition can be viewed online as well at [www.LifeAskedDeath.com](http://www.LifeAskedDeath.com)

### ***Budding palliative care services stretched***

**LIFE ASKED DEATH** is timely for Myanmar, where budding palliative care facilities and services are being pushed to its limits. The lack of palliative care and pain relief medicines in Myanmar are compounded by other socio-economic issues such as poverty, high patient load and overcrowding at hospitals and healthcare facilities.

Globally, an estimated 40 million people require palliative care each year, of whom half will need care at the end of life. In Asia alone, annual estimates indicate that 24 million people need palliative care and of these, nearly 11 million will die in pain and distress due to a lack of access to pain medications.

According to the Global Atlas of Palliative Care, published jointly by the World Health Organization (WHO) and the Worldwide Palliative Care Alliance (WPCA), Myanmar suffers from inadequate access and availability of hospice and palliative care. Palliative care activities are heavily donor dependent and hence unsustainable. Despite being available now, access to morphine is severely limited, contrary to WHO's recommendation of oral morphine as the gold standard and essential medication for pain relief that should be available to suffering patients. *See Chart: Morphine Consumption*

### ***Developing palliative care in Myanmar & Asia***

Produced by **Moonshine Movies**, the documentary highlights the scale of pain and suffering that needs to be urgently addressed in Myanmar and Asia, and offers insights into the positive outcomes that can be achieved even in resource-limited countries. The documentary brings viewers to **Bangladesh, Myanmar and Sri Lanka** to witness how Lien Collaborative's specialist volunteers bring palliative care and training to these countries. When international experts and local stakeholders work together to develop palliative care capacity in the government-run health systems, the barriers to pain relief and humane care can be removed.

It also reveals how palliative care helps to improve the quality of life of patients and uplift their families who are struggling to cope with the suffering and the practical and financial implications of a life-threatening illness. LIFE ASKED DEATH uncovers how essential pain medications such as oral morphine can bring relief to patients who are in agony, because of lack of access, awareness and availability of palliative care and pain relief medications. What is urgently needed are policy changes which will allow the integration of palliative

care into health systems to provide patients with better care and greater access to pain relief medications.

### ***Touching Lives, Relieving Pain, Empowering the Patient***

LIFE ASKED DEATH takes us to Myanmar, where the physical pain and financial stress commonly experienced by patients and families are seen in **Mr Sein Hla Aung's** story. He suffers from mouth cancer and has no access to pain relief medicines where he lives. He has to travel long distances every three weeks to seek treatment in the Yangon hospital. The cancer ward's stock of three packets of morphine is enough for only one patient, hardly sufficient for the ward's 250 patients, most of whom require pain-relief medicines.

His wife risks losing her job as she has to take time off to care for him. In addition to better management of his pain and symptoms, the Lien Collaborative trainees include social workers who can help his family obtain other forms of support.

Another Myanmar patient in the documentary is 34-year-old **Ms Cho Cho Win**, a single mother with a young son, suffering from cervical cancer. She suffers pain from the spine compression due to the cancer having spread to her bones. Like Mr Sein, she too needs morphine to relieve her pain.

"Until morphine is more widely available in Myanmar, patients will not be getting the most effective pain relief possible in hospitals," said Dr Ramaswamy Akhileswaran, co-leader of the Lien Collaborative's Myanmar programme and palliative care specialist from Khoo Teck Puat Hospital, Singapore. "They can't get any such medications once they go home, hence the needless pain and stress."

### ***Progress in Myanmar under the Vision of "Training of trainers" to expand palliative care outreach***

Beginning with Myanmar and Bangladesh in 2013, Sri Lanka in 2014 and, now India, the Lien Collaborative draws on philanthropic and tertiary institutions, palliative care providers and individuals to collaborate on a 'Training of Trainers' in palliative care programme targeted at resource-limited countries in Asia.

The initiative has involved over 40 international experts, comprising doctors, nurses and social workers, who volunteer their time to train some 140 health professionals, who in turn are expected to share this knowledge with their colleagues. In the course of their training, the international teams support local efforts to establish palliative care services in key government government-run hospitals and to make oral morphine available to the patients.

### ***Myanmar presses on for palliative care and training***

In **Myanmar**, six sessions of the "Training-of-Trainers" programme have been implemented. Since 2015, five doctors have been hosted by Singapore's National Cancer Centre under the Overseas Clinical Attachment Programme. The Collaborative has involved eight faculty members from Australia, Malaysia and Australia who provide palliative care training to 28 participants comprising doctors, nurses and medical social workers.

Besides the availability of oral morphine, inpatient and outpatient palliative care services are available at the Yangon General Hospital. At the Mandalay General Hospital, an inpatient consult service has been initiated. *See Annex: Palliative Care in Myanmar*

### ***Collective action needed to remove the barriers to pain relief***

The Lien Collaborative believes that by working collectively with the community, the government, healthcare professionals, the patients and their caregivers, unnecessary suffering can be avoided by breaking down the barriers to pain relief.

Such barriers include unfounded fears about morphine in patients and family members, fear and ignorance of doctors in prescribing morphine and over-regulation and unfounded fears resulting in most hospitals and pharmacies not stocking morphine.

### **Curtain of Hope**

The Lien Collaborative has drawn open a curtain of hope to what palliative care can do and how these skills can be acquired. With training and access to pain relief medications, lives can be saved from needless suffering. The documentary concludes: "For millions around the world, death is indeed a painful truth, but there is an alternative which delivers quality of life until our dying breath. This is not a beautiful lie. It is already here for the asking."

*Chart – Morphine Consumption, A Comparison*

*Annex – Progress in Palliative Care in Myanmar*

~oOo~

### **About the Lien Collaborative for Palliative Care**

The Lien Collaborative for Palliative Care project is co-developed by the Asia Pacific Hospice Palliative Care Network (APHN) and the Lien Foundation.

This initiative seeks to match the supply of expert resource and knowledge to the demand from developing countries for such skills and know-how so as to build palliative care capabilities in a systematic, impactful and sustainable way. It draws on philanthropy, tertiary educational institutions, palliative care service providers and individuals to collaborate on a project designed to strengthen palliative care capacity and leadership.

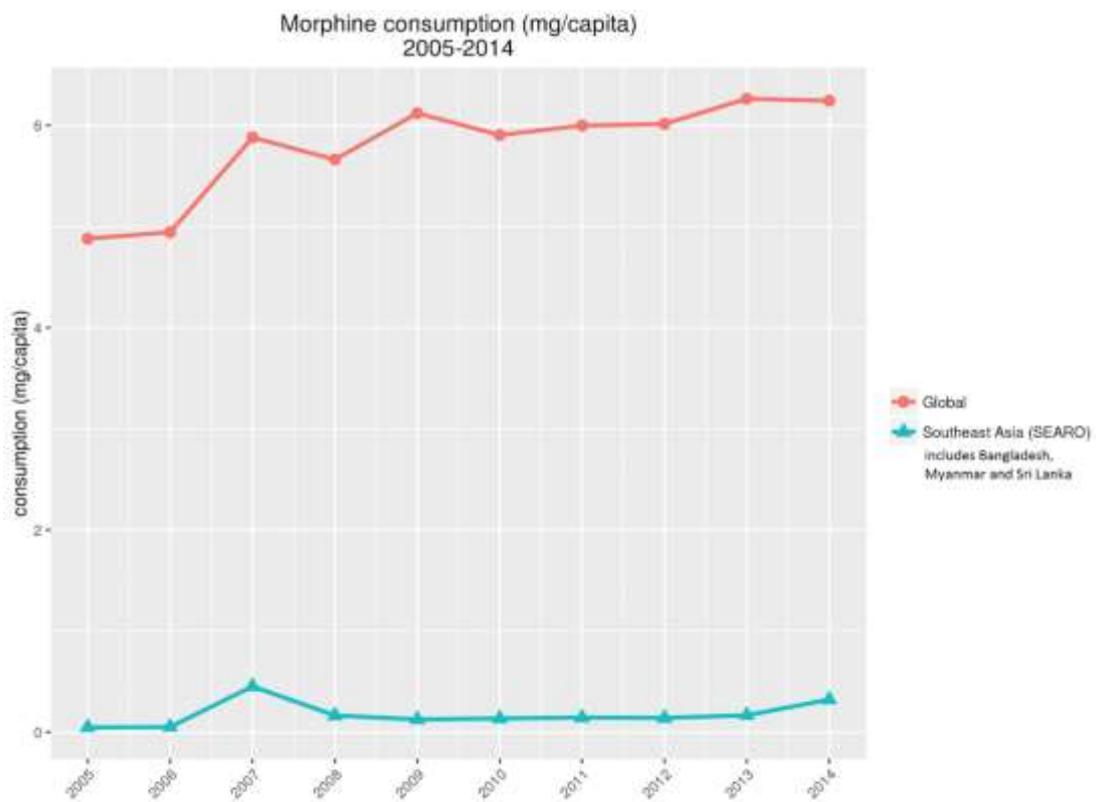
The project aims to help build palliative care capacity in the Asia Pacific region and to integrate this with the mainstream government health system. Its focus is on countries with little or no services.

**For media queries, please contact: Dr Wah Wah Myint Zu, Yangon General Hospital, +95 973156234, wahwahmyintzu@gmail.com**



*It hurts – patient and caregiver in Yangon General Hospital, Myanmar*

### Chart



Sources: International Narcotics Control Board, World Health Organization population data  
By: Pain & Policy Studies Group, University of Wisconsin-WHO Collaborating Center, 2016

## Annex: Palliative Care in MYANMAR

<b>Global standing</b>	
<b>Ranking in the world – Quality of Death Index<sup>4</sup></b>	76 <sup>th</sup> out of 100 countries  Did best in Affordability of Care category
<b>Global Atlas of Palliative Care at the End of Life<sup>5</sup></b>	Isolated service provision: Very limited hospice and palliative care services  Palliative care activities need to be less donor dependent in order to be sustainable
<b>Morphine usage</b> <based on 10 year data (2005-2014) <sup>6</sup> >	Very low, annual average consumption of 5 mg/capita, well below world average  Oral morphine is being made available by the government
<b>Key Challenges</b>	
<b>Getting funds for palliative care</b>	Lack of professional training & trained specialists  Largely charitably funded community services
<b>No government-led strategy</b>	Government subsidies absent  Limited access to painkillers
<b>Recent Milestones in Palliative Care Development</b>	
<b>Policy</b>	Two trainees of the Lien Collaborative program are participating in a project on palliative care establishment as part of the National Cancer Control Program
<b>Services</b>	New outpatient and inpatient services started at Yangon General Hospital in 2015  New inpatient services started at Mandalay General Hospital in 2016
<b>Education</b>	Plans to introduce palliative medicine in the medical undergraduate and post-graduate curriculum

<sup>4</sup> The 2015 Quality of Death Index, Economist Intelligence Unit

<sup>5</sup> Global Atlas of Palliative Care at the End of Life published jointly by the WHO and the Worldwide Hospice Palliative Care Alliance (WHPCA), January 2014

<sup>6</sup> International Narcotics Control Board, World Health Organization by Pain & Policy Group, University of Wisconsin, WHO Collaborating Centre, 2016

<b>About the Lien Collaborative in MYANMAR- started in 2013</b>	
<b>Number of Lien Collaborative faculty members</b>	8 doctors, nurses and medical social workers from Australia, Malaysia and Singapore
<b>Number of Participants</b>	28 from 12 institutions  - 17 doctors, 7 nurses and 2 social workers  Centralised training at Yangon General Hospital
<b>Training of Trainers in Palliative Care program</b>	6 in-country training sessions – total of 30 training days
<b>Overseas Clinical Attachment program</b>	Five doctor participants completed overseas training at the National Cancer Centre Singapore