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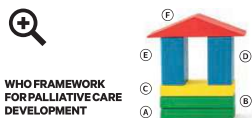


General data

POPULATION, 2023
54,133,798
SURFACE, KM², 2022
676,590
PHYSICIANS / 1,000 INH, 2022
N/A

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
Lower-middle
HUMAN DEVELOPMENT INDEX RANKING, 2021
149
GDP PER CAPITA (US\$), 2023
1233,2
HEALTH EXPENDITURE (% GDP), 2021
5,63
UNIVERSAL HEALTH COVERAGE, 2021
52



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

- Ⓐ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- Ⓑ POLICIES
- Ⓒ RESEARCH
- Ⓓ USE OF ESSENTIAL MEDICINES
- Ⓔ EDUCATION AND TRAINING
- ⓫ PROVISION OF PC



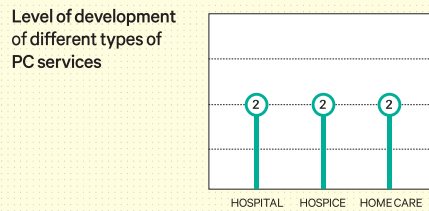
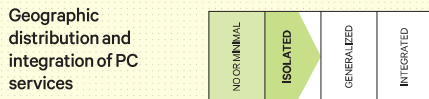
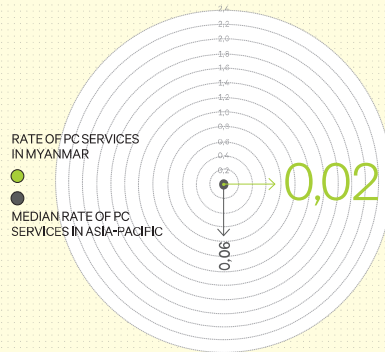
LEVEL OF DEVELOPMENT

Myanmar

F Provision of PC (Specialized Services)

Total number of Specialized PC services **8**
Rate of PC services per 100,000 inhabitants **0,02**

Myanmar in the context of Asia-Pacific regions



Pediatric PC Services
GEOGRAPHIC DISTRIBUTION AND INTEGRATION **2**
TOTAL NUMBER **1**

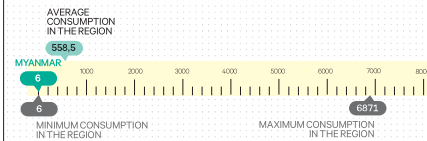
AP

Myanmar

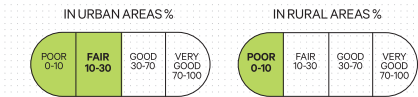
D Use of essential medicines

Opioids consumption (excluding methadone) **6**
S-DDD/MILL INHABITANTS/DAY

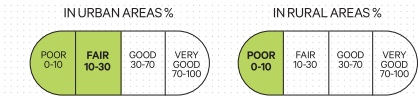
Myanmar in the context of Asia-Pacific regions



Overall availability of essential medicines for pain and PC at the primary level



General availability of immediate-release oral morphine at the primary level



C Research

PC-related research articles **1**

Existence of PC congresses or scientific meetings **2**

National Association: U Hla Tun Hospice (Cancer) Foundation.
Consultants: Wah Wah Myint Zu; Shoon Mya Aye; Thet Hein.

Data collected: June-September 2024.
Report validated by consultants: October - November 2024
Report sponsored by National Association: No
Edited by Atlantes Research Team University of Navarra (Spain)

E Education & Training

Medical schools with a dedicated mandatory PC subject **7/9**

Nursing schools with a dedicated mandatory PC subject **26/26**

Recognition of PC specialty **1**

B Policies

National PC plan or strategy **3**

Responsible authority for PC in the Ministry of Health **2**

Inclusion of PC in the basic health package at the primary care level **1**

A EMPOWERMENT of people and communities

Groups promoting the rights of PC patients **2**

Advanced care planning-related policies **1**


AP Myanmar

People & Communities

<p>Ind1</p> <p>Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.</p>	 <p>Pioneers, champions, or advocates of palliative care can be identified, but without a formal organization constituted.</p>	<p>In Myanmar, several organizations advocate for palliative care and support for patients with serious illnesses. The Palliative Care Team OPD at Yangon General Hospital promotes education and guidelines to integrate palliative care into primary health-care, collaborating with local providers to expand home care services. The U Hla Tun Hospice Cancer Foundation, established in 1988, provides free, holistic care for end-of-life cancer patients, including home and inpatient hospice care, and collaborates with the Palliative Care Team and Padummar Cancer Support Group. The Padummar Foundation, founded in 2019, emphasizes community involvement, offering psychosocial and spiritual support for cancer patients. Additionally, the Myanmar Oncology Society (MOS) promotes palliative care for cancer patients across the country.</p>
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<p>Ind2</p> <p>Is there a national policy or guideline on advance directives or advance care planning?</p>	 <p>There is no national policy or guideline on advance care planning.</p>	<p>There are no established national policies or guidelines for advance care planning.</p>
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Policies

<p>Ind3</p> <p>3.1. There is a current national PC plan, programme, policy, or strategy.</p> <p>3.2. The national palliative care plan (or programme or strategy or legislation) is a stand-alone.</p>	 <p>Actualized in last 5 years, but not actively evaluated or audited.</p>  <p>There is a dedicated section on palliative care contained within another national plan such as for cancer, NC diseases or HIV.</p>	<p>The Myanmar's National Palliative Care Plan was initiated under the previous democratic government but has faced setbacks due to political instability. Palliative care is currently included in the updated National Cancer Control Plan for 2023-2027, with specific indicators and policies. However, these indicators and policies have yet to be fully established, and palliative care remains a component within broader national plans for cancer and non-communicable diseases.</p>
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AP Myanmar

Policies

<p>3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.</p>	 <p>The indicators to monitor and evaluate progress with clear targets exist but have not been yet implemented.</p>	
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<p>Ind4</p> <p>PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.</p>	 <p>Not at all.</p>	<p>There are no specific policies or legislation ensuring the integration of palliative care into primary healthcare across the country.</p>
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<p>Ind5</p> <p>5.1. Is there a national authority for palliative care within the government or the Ministry of Health?</p> <p>5.2. The national authority has concrete functions, budget and staff.</p>	 <p>The authority for palliative care is defined but only at the political level (without a coordinating entity defined).</p>  <p>There are concrete functions but do not have a budget or staff.</p>	<p>There is no specific national authority for palliative care within the government or the Ministry of Health in Myanmar. However, the Noncommunicable Disease Control Department of the Ministry of Health, with support and guidance from the Cancer Pain and Palliative Care OPD group (Yangon General Hospital), is leading efforts to promote palliative care in the community. These efforts include training primary healthcare staff and developing a locally adapted palliative care handbook to aid in service expansion. Although the Palliative Care Plan outlines specific functions, it lacks both dedicated staff and a budget for implementation.</p>
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AP Myanmar

Research

Ind6

Existence of congresses or scientific meetings at the national level specifically related to PC.



Only sporadic or non-periodical conferences or meetings related to palliative care take place.

Although there are currently no national-level palliative care congresses organized, several workshops are held annually in Yangon to promote palliative care and research activities. Some significant examples include a 2023 webinar on managing cachexia in cancer patients and the Myanmar Health Science Conference focusing on palliative and hospice care sustainability. Other activities include a psychosocial and spiritual care workshop for cancer patients in Yangon, an online CME talk on nutritional issues in cancer patients (2022), and World Hospice and Palliative Care Day events by U Hla Tun Hospice. Additionally, a 2020 military conference addressed safe and effective morphine use, while earlier initiatives, such as a 2019 talk on palliative care updates and a 2018 discussion on its role in cancer survivorship at the Myanmar Research Congress, have further advanced awareness and education.

Ind7

Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.



Indicates a minimal or nonexistent number of articles published on the subject in that country.

Medicines

Ind8

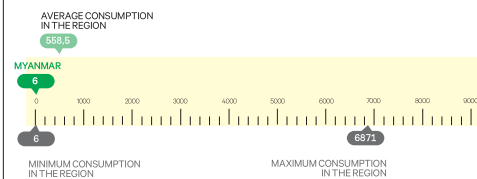
Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.

Average consumption of opioids, in defined daily doses (S-DDD) for statistical purposes per million inhabitants per day, 2020-2022: 6 S-DDD



S-DDD PER MILLION INHAB / DAY

COUNTRY VS REGION



AP Myanmar

Medicines

Ind9

9.1. Percentage of health facilities at the primary care level in urban areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.



Fair: Between 10% to 30%.

9.2. Percentage of health facilities at the primary care level in rural areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.



Poor: Between 0% to 10%.

Access to essential medicines for pain and palliative care in Myanmar faces significant challenges. While morphine was locally manufactured until 2017 by Burma Pharmaceutical Industry (BPI) and made available in injection form, advocacy efforts pushed for intermediate-release morphine in tablet and syrup forms. BPI also produced codeine and tramadol, supplied to tertiary hospitals for cancer patients. Despite improved availability of opioids in pharmacies, irregular supply, shortages, and affordability issues persist. The ongoing crisis has further disrupted medical supply chains, exacerbating shortages and limiting access, especially in conflict-affected and rural regions. In these areas, caregivers must travel to tertiary facilities for morphine, which is only provided for up to two weeks.

Ind10

10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).



Fair: Between 10% to 30%.

10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).



Poor: Between 0% to 10%.

The availability of immediate-release (IR) morphine in Myanmar is limited due to regulatory barriers, logistical challenges, and ongoing crises affecting medical supply chains. Despite being included in the national formulary, opioids like morphine are often unavailable. IR morphine is provided free of charge at tertiary government hospitals with cancer centers, but caregivers in rural and conflict-affected regions face significant hurdles, often traveling long distances to access it. Even then, morphine is supplied for a maximum of two weeks. Supply shortages and affordability issues further exacerbate disparities in opioid accessibility for pain management across the country.

AP Myanmar

Education & Training

Ind11

11.1. The proportion of medical schools with **COMPULSORY** teaching in PC (with or without other optional teaching) over the total number of medical schools in the country

7/9



Myanmar has eight civil medical schools and one military medical academy, with palliative care integrated as a mandatory 30-hour module in the undergraduate curriculum at seven of the eight civil schools. The updated MBBS curriculum, including palliative care, is expected to be adopted by all schools by 2025. Although training opportunities for physicians remain limited, initiatives like the Asia-Pacific Hospice Palliative Care Network and LIEN Foundation have trained 28 providers through collaborations with the Myanmar Medical Association. In nursing schools, palliative care is included as part of a lecture within the compulsory "Adult Medicine" subject.

11.2. The proportion of medical schools with **OPTIONAL** teaching in PC...

0/9

11.3. The proportion of nursing schools with **COMPULSORY** teaching in PC (with or without other optional teaching) over the total number of nursing schools in the country.

26/26

11.4. The proportion of nursing schools with **OPTIONAL** teaching in PC...

0/26

Ind12

12. Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.



There is no process on specialization for palliative care physicians.

Although there is an international training course in palliative care for physicians (MRCP), it is not official recognized as palliative medicine specialization in the country.

AP Myanmar

Provision of PC / Services

Ind13

13.1. There is a system of specialized PC services or teams in the country that has **GEOGRAPHIC** reach and is delivered through different service delivery platforms.



Isolated provision: Exists but only in some geographic areas.

13.2. Are available in **HOSPITALS** (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.



Ad hoc/ in some parts of the country.

13.3. Free-standing **HOSPICES** (including hospices with inpatient beds).



Ad hoc/ in some parts of the country.

13.4. **HOME CARE** teams (specialized in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.

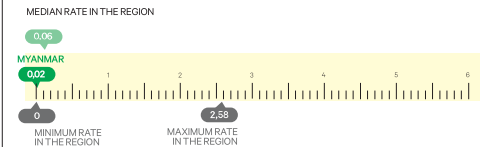


Ad hoc/ in some parts of the country.

13.5. Please enter the total number of specialized PC services or teams in the country.

In Myanmar, there is a developing system of specialized palliative care services but faces challenges, including limited manpower, regulatory barriers, and rural-urban disparities. Hospice services are led by U Hla Tun Hospice, which operates centers in Yangon and Mandalay, providing inpatient and home care. Hospital-based services include Yangon General Hospital, the only public facility with a dedicated palliative care unit (established in 2015), offering inpatient, outpatient, and home care services through a multidisciplinary team. Mandalay General Hospital also has trained palliative care staff. Private facilities like Shwe La Min Hospital and Karuna Compassionate Care Center contribute to palliative care delivery. Home-based care is supported by local organizations like CARE Myanmar, Padummar Cancer Support Group, and primary healthcare staff, focusing on urban communities. Myanmar has at least eight palliative care teams across public and private hospitals, hospices, and home care initiatives, corresponding to a rate of 0.015 specialized services per 100,000 people.

RATE OF SPECIALIZED PC SERVICES/100,000 INH



8 ← SPECIALIZED PALLIATIVE CARE SERVICES

Ind14

14.1. There is a system of specialized PC services or teams for **children** in the country that has **geographic** reach and is delivered through different service delivery platforms.



Isolated provision: palliative care specialized services or teams for children exist but only in some geographic areas.

14.2. Please enter the total number of pediatric specialized PC services or teams in the country.



1 PPC TEAMS

Yangon Children's Hospital (YCH) provides extensive pediatric oncology services that incorporate palliative care for children with cancer.