

REPUBLIC OF MACEDONIA



Population: 2,045,262

Current Directory:

Printed version

Online version

None identified x

Key Contact/National Association

Key contact:

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National Association:

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Palliative Care Services

NK = not known

Number of Palliative Care Services

| | Inpatient Palliative Care Units | Hospices | Consultant Teams in Hospitals | Home Care Teams | Day Centres | Total |
|--|---------------------------------|----------|-------------------------------|--|---------------------------------|-------|
| Adult/Children | 0 | 2 | 2 | 2 | 0 | 6 |
| Paediatric only | 1 | 0 | 0 | 0 | 0 | 1 |
| | | | | Inpatient Palliative Care Units/Hospices | Chronic Hospitals/Nursing Homes | Total |
| Number of beds allocated to adult palliative care inpatients | | | | 150 | 0 | 150 |
| | | | | Adults | Children | Total |
| Number of Bereavement Support Teams | | | | 0 | 0 | 0 |

Comments/Sources

- There are two specialist institutions for palliative care in the Republic of Macedonia – both are Sue Ryder Care hospices funded by the national health fund. The hospices have beds exclusively allocated to palliative care, and provide multi-professional and specialist palliative care for the terminally ill. They also perform formal education and training for professionals, families, and volunteers.
- Although there are no specific day centres, the Sue Ryder Care hospices accept adult patients who are in need of day care.
- There are 70 beds for adult patients in each of the two Sue Ryder Care hospices and five beds in each of the two hospices allocated for intensive palliative care.
- Although there are no specific paediatric hospices or centres for palliative care,



EAPC Task Force on the development of Palliative Care in Europe

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|---|
| <p>children may receive palliative care at the paediatric clinic (department of haematology, oncology, neurology, day hospital).</p> <ul style="list-style-type: none"> There are no specialist bereavement support teams, although some bereavement support is provided informally by palliative care teams. <p>[EAPC Palliative Care Facts in Europe Questionnaire 2005]</p> |
|---|

| Adult Palliative Care Population | | |
|---|---|-----|
| 89% | of patients receiving palliative care have a cancer diagnosis | |
| 11% | of patients receiving palliative care have other incurable conditions | |
| | Cancer | (n) |
| Number of patients who die at home | NK | 50% |
| Number of patients who die in a general hospital | NK | NK |
| Number of patients who die in other healthcare institutions | NK | 50% |

| Comments/Sources |
|--|
| <ul style="list-style-type: none"> Percentage of patients with cancer/non-cancer diagnoses receiving palliative care is an estimate only. Place of death figures are estimates only. In the hospice in Skopje, 60% of patients die in the hospice/40% die in their homes. In the hospice in Bitola, 50% of patients die in the hospice/50% die in their homes. <p>[Data provided by the Sue Ryder Care hospices and the domiciliary palliative care service] [EAPC Palliative Care Facts in Europe Questionnaire 2005]</p> |

| Palliative Care Workforce Capacity | | | |
|------------------------------------|-----------|-----------|-------|
| | Full-time | Part-time | Total |
| Physicians | 10 | 0 | 10 |
| Nurses | 42 | 0 | 42 |
| Social Workers | 2 | NK | 2 |
| Psychologists | 1 | NK | 1 |
| Physiotherapists | 2 | NK | 2 |
| Occupational Therapists | NK | NK | 0 |
| Spiritual/Faith leaders | NK | NK | 2 |
| Volunteers | NK | NK | 6 |

| Comments/Sources |
|--|
| <ul style="list-style-type: none"> In each of the two Sue Ryder Care hospices there are four doctors working full time in palliative care. There are also two doctors working full time in the domiciliary service. In each of the two Sue Ryder Care hospices there are 18 nurses working full time. There are also six nurses working full time in the domiciliary palliative care service. <p>[EAPC Palliative Care Facts in Europe Questionnaire 2005]</p> |

| Funding of palliative care services | |
|---|----|
| Total number of palliative care services funded by the government | 2 |
| Total number of palliative care services funded privately or by NGO's | NK |

| Comments/Sources |
|--|
| <ul style="list-style-type: none"> Capital investment for the construction and equipment of the hospices was provided through a partnership project between Sue Ryder Care UK, the Government of the Republic of Macedonia and the EU-PHARE Program. Palliative care services and employee salaries in the Sue Ryder Care hospices and the domiciliary palliative care service are funded through the health insurance fund. Much aid and equipment is funded privately or by non-governmental organizations. The programme for continuous education involving national and international |

experts is funded by the Soros Foundation.

- The domiciliary palliative care service is supported by a combination of funds. A partnership between Sue Ryder Care UK and the Soros Foundation has funded the purchase of vehicles and mobile equipment and supported the education programme. The salaries of the teams that work in the domiciliary service are funded by the Ministry of Health through the health insurance fund.

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Perceived use of main opioids in palliative care

| Order of frequency | Opioid | Estimated cost per month (€) |
|--------------------|------------|------------------------------|
| First opioid | Morphine | 90 euros |
| Second opioid | Pentazocin | 70 euros |
| Third opioid | Methadone | 65 euros |

Comments/Sources

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Key issues and challenges

- Lack of a national plan and strategy for the development of palliative care.
- The availability of opioids for home therapies.
- The reluctance of doctors to prescribe the necessary doses of opioids to terminally ill patients.
- Lack of a wide spectrum of opioids for different levels of pain.
- The lack of a paediatric team for palliative care (hospice and home care service).
- There is no administration of opioids in a form available for paediatric patients with palliative care needs.

[EAPC Palliative Care Euro-Barometer 2005]

Palliative care accreditation

- There is no specialist accreditation for palliative care professionals in the Republic of Macedonia.

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Palliative care milestones

- 1998: The first hospice in the Republic of Macedonia is opened.
- 2000: The results from the research forum on the “*Application and availability of opioids for terminally ill patients*” are published.
- 2001: The second hospice in the Republic of Macedonia is opened.
- 2003: Palliative care becomes an integral part of the health care system of Macedonia.
- 2004: Publication of the Council of Europe (2003) report on palliative care (Recommendation 24 of the Committee of Ministers to member states on the organisation of palliative care) is officially marked by the hospice for specialist palliative care Sue Ryder Care.
- 2005: Interdisciplinary teams for palliative care are created and the domiciliary palliative care service is developed.

[EAPC Palliative Care Euro-Barometer 2005]

Health policy

- The integration of palliative care into the health care system of Macedonia has resulted in: quality health care being provided to the terminally ill in their surroundings; the valuing of interdisciplinary and multi professional teams in palliative care; the right of the patient and family members to participate in the decision making process; adequate funding of palliative care services through the health insurance fund; an opportunity to include palliative care within the medical faculty curriculum.
- The Sue Ryder hospice for specialist palliative care has not participated in the Council of Europe discussions about euthanasia (the Marty Report), apart from public debates within the national media.
- At the current time, there are no initiatives for the legalization of euthanasia or assisted suicide in the Republic of Macedonia.

[EAPC Palliative Care Euro-Barometer 2005]

References

Clark, D., and Wright, M. (2003) Transitions in End of Life Care. Hospice and related developments in Eastern Europe and Central Asia. Buckingham: Open University Press, 2003, pp.81-83, Macedonia.

http://www.eolc-observatory.net/global_analysis/macedonia.htm

Information correct as at: 7th August 2006

