Barcelona Declaration

The Barcelona Declaration on Palliative Care

The problem

Worldwide 52 million people die each year. Approximately one out of ten deaths is due to cancer and millions more suffer from other life-threatening conditions including AIDS and diseases of old age. Of patients with advanced cancer 70% have pain. In the developing countries of the world people with cancer are only identified, if at all, after their disease has become incurable). Unrelieved suffering on this scale is unacceptable and unnecessary.

What we know

In recent years, major advances have been made in pain and symptom management in people with progressive incurable diseases. Great strides have taken place in under-standing the psychological social and spiritual aspects of dying and death. Health professionals family members volunteers and others are working together to create dynamic partnerships for the relief of suffering at the end of life. Palliative care incorporates medicine, nursing, social work, pastoral care, physiotherapy occupational therapy and related disciplines.

What must be done

Palliative care must be included as part of governmental health policy, as recommended by the World Health Organisation.

Every individual has the right to pain relief. Palliative care must be provided according to the principle of equity, irrespective of race, gender, ethnicity, social status, national origin and the ability to pay for services.

The experience gained from the palliative care of cancer should be extended to the care of people with other chronic incurable diseases.
Inexpensive effective methods exist to relieve pain and most other symptoms. Thus cost should not be an impediment.

Governments should use knowledge about palliative care in a rational way by:
- Establishing clear and informed policies.
- Implementing specific services.
- Educating health professionals.
- Making necessary drugs available.
- Systematic assessment of needs in palliative care should precede the establishment of any service at the local regional and/or national level.

Families and other informal care givers are essential contributors to the delivery of effective palliative care. They should be recognised and empowered by government policy.

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