

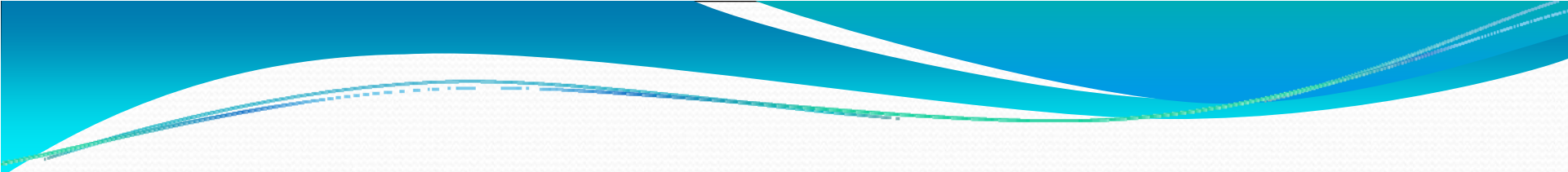


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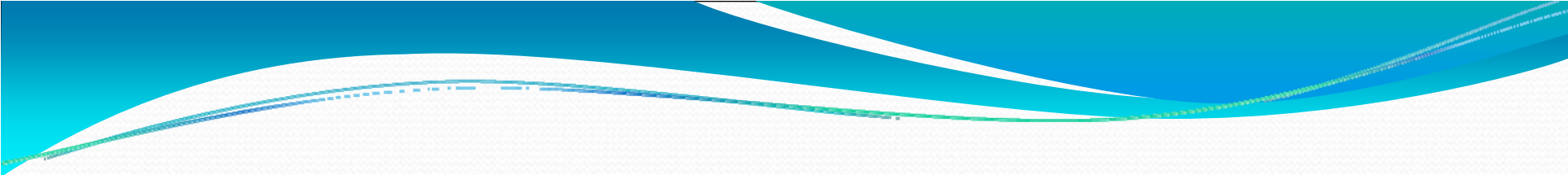
Ufficio XI «Cure palliative e terapia del dolore»



First of all I would like to thank Active Citizenship Network, the European network of Cittadinanzattiva, because the study of this matter in an European context is a strong incentive to the activity carried out by the Italian Ministry of Health.


The need to treat pain has been developed over the last years within a more global treatment of the patient. The change of prospect from a supposed need to experience pain, as an early warning sign of some pathologies, to an acknowledgement of pain as a disease to be treated, has required the introduction of a new vision of treatment that, besides to complete the course of treatment, it has, as its main objective, a therapy oriented to functional and social recovery of the sick person.

In this context, the treatment of both acute and chronic pain, is of a fundamental importance, because it is oriented to a quick recovery of physiological functions, restoring the person as soon as possible to its active social role. The objectives to be pursued in the treatment of pain, therefore, invest several areas: clinical (pain reduction), ethical (less suffering) and economic (lower costs). Proper management of pain treatment means greater effectiveness, efficiency and ethics of the system that takes care of the sick person.



The answer to these issues has been met, at regulatory level, by Law 38 of March 15th, 2010, entitled "Measures to ensure access to palliative care and pain therapy", this law represents a unique example of legislation in the Italian and European panorama.


This law, one of the first in Europe, protects at art. 1 "the right of citizens to have access to palliative care and pain therapy," and detects three networks of treatment dedicated to palliative care, pain therapy and pediatric patient.



For the latter, the law give a special protection and attention to the pediatric patient, as a subject with specific needs to whom give proper answers to their requirements and their family whom together must face the disease. This right, ratified in a specific article of law in Italy, should become a shared and guaranteed right for all European citizens.

The law also recognizes a specificity of the patient as "... the person who suffers from moderate to severe chronic pain pathology", identifying the patient as one who is suffering from a repeated pain over time which makes it difficult to manage activities of daily life.

In order to give proper answers to the patient's needs with chronic pain the Law provides the creation of three different national networks. This model ensures the continuity of care of the patient from the hospital to their home, including in such network the whole set of health care facilities and identifying professionals dedicated to supply palliative care and pain control at all stages of the disease and for any type of patient.



The pain therapy network aims to improve the quality of life of adults suffering from pain, whatever is its nature, helping the reintegration of the patient in the social and labour context and reducing the level of disability due to pain.

The attention of the lawmaker to the fight against pain is clear in art. 7 of Law 38/2010, because make it compulsory, within the medical record in use in all health facilities, to report "... the characteristics of the monitored pain and its evolution during hospitalization, as well as the analgesic technique and drugs used, the relevant doses and the achieved analgesic results. "

Furthermore, the procedures simplification for drugs access used in the treatment of pain, as indicated in Art. 10 of the mentioned Act, allows a greater accessibility to all medications for the pain relief.

Despite this simplification, Italy, one of the most representative European country, has a consumption of opioid drugs lower than in other European countries, but with a growth rate significantly consistent. The principle of accessibility to drugs needed to fight unnecessary pain should be highlighted and shared by all European countries in order to grant equity in care to all citizens.

The organization to treat and to assist the patient suffering from chronic pain is organized on the relation between three nodes which are complementary: the surgeries of general practitioners, the SPOKE centers (pain therapy outpatient centers) and HUB centers (hospitals pain management centres).

This organizational model recognize a fundamental role to the general practitioner because, being the first physician to meet and listen the patient, he can send him towards the structure considered as most appropriate to the specific needs of the patient.

The outpatient center SPOKE is responsible for making provision for diagnostic, therapeutic, pharmacological, instrumental and surgical interventions differently integrated to reduce pain and disability of assisted persons in outpatient center.

At the hospital centre (HUB) remains high complexity interventions on an outpatient basis, hospitalization and day hospital or alternative conditions provided by the Regional Authorities.


The pain therapy network, avoiding improper use of the emergency room, shifts the center of treatment from the hospital to the territory equipped with general practitioner and organizational structures dedicated to the treatment of pain.

The three levels are in direct contact, and interact in the diagnostic, therapeutic and rehabilitation pathway necessary to the patient, with a first triage performed by a general practitioner who, after listening to the patient, can send him towards the most proper structure to meet his needs.

In order to monitor the state-of-the-art and the development of the pain relief network, in addition to the creation of an office at the Ministry of Health in charge of this activity, each year, as provided by Article 11 paragraph 1 of the Law 38, the Minister of Health presents a report to the Parliament on the implementation status of the law by providing indications based on the collected information and monitoring data as provided by the law in Article 9. The Annual Report presented to the Parliament shows the-state-of-the-art of the development of palliative care and pain therapy in Italy, highlighting some elements potentially useful to an ongoing process of improvement of the law, in order to favour actions of system to increase the effectiveness of those processes of assistance to persons suffering from incurable disease and patients with chronic painful pathologies, ensuring thus a full protection to the citizen's right to have access to palliative care and pain therapy.

The development of specific pathway for the treatment of patient suffering from chronic pain, can not leave aside a constant comparison with the national and international institutions, professionals and non-profit organization that support the health workers activity.

In fact, the commitment against unnecessary pain is coming, with more and more force, into the European picture of the health policy. Governments and qualified Ministries, scientific societies, companies and organizations for the protection of patients' rights has long been monitoring the phenomenon by collecting data and information about its spread, about what is its impact on the health policies of each country, as well as its social and economic impact.



New laws, such as the Italian one, the 38/2010 have acknowledged highly innovative contents to defend citizens from unnecessary pain and, in particular, this law made us, Italy, a leading country in this field.

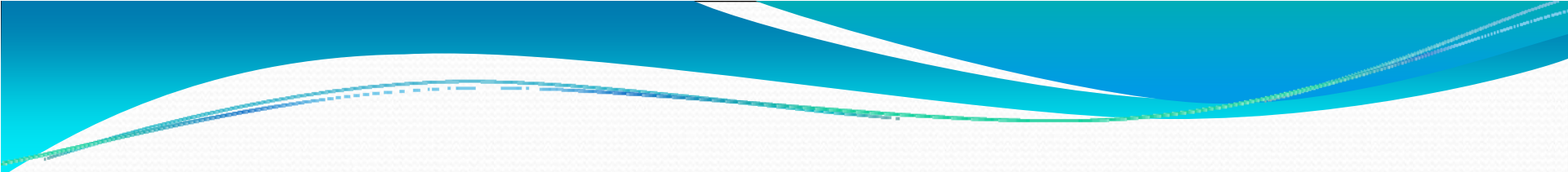
At the same time a civic engagement on this issue is increasing. In fact, more and more patients' organization show their willingness to be active actors in promoting a new policy to reduce unnecessary pain.

Even though Italy has adopted accurate rules of law against pain we are aware that only by a careful and conscious civic audit we can hope that, what the law provides become a real assistance in the territory.

Other examples of European initiatives, with a similar subject such as palliative care, have shown how the REC Recommendation 24 of the Ministerial Committee of the Member States, issued in 2003 on the organization of palliative care, is not yet realized in many European countries.

Today is a great occasion for a constructive exchange of views to learn about the solutions adopted by the others European countries, highlighting, where possible, strategies of common organization to carry out a social welfare response to the needs of the patient. The results of the project, that involved 18 European countries for a survey on their attention to the issue of pain, may represent a common basis for a deeper thinking on the most appropriate solutions to fight unnecessary pain.





Thanks to this project, together with the forthcoming Italian Presidency of the EU (European Union), Active Citizenship Network, the European Network of Cittadinanzattiva asked to the Minister of Health to include, as one of the priorities of the Italian Presidency agenda, the issue of Chronic Pain. The Ministry of Health has shown interest on this project, “committing itself to promote a network among member countries to share best practices on palliative care and pain therapy”, as stated by the current Minister of Health during the National Day of Relief.