

# Joint media release

Monday 11 December 2023

## Ongoing pain medicine shortages risk quality of life for all Australians

A health crisis is looming for palliative care patients of all ages as well as those with chronic pain, cancer and other conditions requiring effective pain control with critical acute pain medications in dire shortage.

Key health bodies including Palliative Care Australia (PCA), the Australian & New Zealand Society for Palliative Medicine (ANZSPM), the Society of Hospital Pharmacists of Australia (SHPA) and Palliative Care Nurses Australia (PCNA) have written to Health Minister Mark Butler detailing their concerns around forecast medicine shortages and reduced access to necessary and vital pain relief.

In early 2023, British pharmaceutical company Mundipharma announced it was removing oral liquid morphine (Ordine) from the Australian market.

Then in late October, the company flagged another nine products containing morphine or oxycodone, used in palliative care and chronic pain management, would be discontinued over the coming 18 months, including:

- OxyNorm capsules
- MS Mono capsules
- Sevredol tablets

It's news that follows similar discontinuations in recent years, including:

- MS Contin sachets
- Jurnista tablets
- Dilaudid oral liquid

"This is a serious risk for all Australians requiring management of serious pain," says Camilla Rowland, Chief Executive Officer, Palliative Care Australia (PCA).

"These discontinuations and shortages threaten the safe delivery of quality care - especially for vulnerable patients like young children and those with a cancer diagnosis. Not to mention the tremendous anxiety these announcements continue to cause clinicians, patients, and carers."

While earlier advocacy from the sector has resulted in some alternative medicines being approved by the Therapeutic Goods Administration (TGA) for supply in the Australian market, it is important to note these are temporary measures, and that a high risk remains there will soon be no Australian-registered product for oral liquid morphine and other opioid medicine formulations.

The temporary solutions in place also come with barriers for some patient groups.

“The cost of alternatives sourced from overseas to replace locally-registered medicines is almost always higher, and this can be a barrier for many people and health services. There is no guarantee that the alternative product will be subsidised by the Pharmaceutical Benefits Scheme (PBS) either which can easily quadruple the cost of the discontinued Australian-registered product,” says Tom Simpson, President of the Society of Hospital Pharmacists of Australia (SHPA).

“There have also been problems with labels written in foreign languages and the size of the deliveries we are receiving can make these alternatives hard to administer safely and cost effectively.”

The joint letter to Minister Butler puts forward several actions to address the risks to the community - reducing the impact of these decisions now and in the future:

- That the minimum reporting period of palliative care medicine shortages and discontinuations be extended from 6 months to 12 months.
- Earlier communication and engagement with clinicians and patients/carers to allow safe transition to alternative medicines.
- Review the current process for TGA registration and PBS listing to ensure critical medicines are affordable in a timely way. For example - waive application fees and invite pharmaceutical companies to make submissions for PBS listings for medicines of critical need or special populations free of charge.
- Proactive sourcing of additional opioid medicines and formulations by the TGA to enhance the options available to patients and health services.
- Noting that Australia is the second-biggest producer globally of the raw materials for opioid manufacture; consider ways of developing our sovereign capability and ensuring local supply.

“Working with our partners in the TGA’s Medicines Shortage Action Group and the Pharmaceutical Benefits Advisory Committee we have been able to move the dial, but action is now required at the highest levels of government to ensure the most vulnerable members of our community can access their human right to care and quality of life,” Ms Rowland says.

“We stand ready to play our part in finding solutions to ensure no patient goes without in their time of need.”

– ends –

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**About the Society of Hospital Pharmacists of Australia (SHPA)**

The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional organisation for the 6,100+ Hospital Pharmacists, and their Hospital Pharmacist Intern and Hospital Pharmacy Technician colleagues working across Australia's health system, advocating for their pivotal role improving the safety and quality of medicines use. Embedded in multidisciplinary medical teams and equipped with exceptional medicines management expertise, SHPA members are progressive advocates for clinical excellence, committed to evidence-based practice and passionate about patient care.

[shpa.org.au](http://shpa.org.au) |   

**About Palliative Care Australia (PCA)**

Palliative Care Australia (PCA) is the national peak body for palliative care representing all those who work towards high quality palliative care for all Australians who need it. Working closely with consumers, our Member Organisations and the palliative care workforce, we aim to improve access to, and promote the need for, palliative care.

PCA believes high quality palliative care should be available and accessible to people living with a life-limiting illness when and where they need it. PCA supports the health, aged care and community sector workforce who all have a role in providing palliative care to people with a life-limiting illness and supporting carers and loved ones.

PCA support the work of specialist palliative care teams who provide care and support for people with more complex symptoms and who educate and support other professionals in their care of people with life-limiting illness.

[palliativecare.org.au](http://palliativecare.org.au)

**About the Australian & New Zealand Society for Palliative Medicine (ANZSPM)**

ANZSPM supports the professional needs of medical practitioners as they work to improve the health outcomes of every person with a life-limiting illness, and their family/whānau, in Australia and Aotearoa. ANZSPM supports free and equitable access to individualised and culturally safe palliative care, for all who need it in Australia and Aotearoa.

[anzspm.org.au](http://anzspm.org.au)

## **About Palliative Care Nurses Australian (PCNA)**

PCNA provides advocacy, representation and professional development opportunities and is committed to championing the delivery of high quality, evidence-based palliative care; building capacity within the palliative care nursing workforce; and supporting members to work to the outer limits of their scope of practice. As the only professional nursing organisation that speaks to palliative care nursing in all its guises, PCNA strongly believes that all nurses have a critical role to play in improving palliative care outcomes for all Australians.

[pcna.org.au](http://pcna.org.au)