

1. To achieve pain control at home, analgesics are given by the mouth (ie. orally), by the clock (ie. regularly to prevent the re-emergence of pain) and by the ladder (i.e. using the WHO pain ladder starting with non-opioids such as paracetamol). Today step 2 (weak opioids such as codeine) are left out because of cost and side effects. So in Uganda we move from step 1 to step 3 (strong opioids) ¹.. Further, the analgesia is given by the patient- i.e. we provide adequate oral morphine for the patient to administer as directed in the place most suitable to them, usually the home.
2. It has been proven that oral morphine effectively controls pain and is acceptable in the African culture.
3. Oral, buccal and occasionally rectal analgesia has proved over 15 years, to be adequate to provide acceptable pain control in 90% of patients 90% of the time.