

AF



General data

POPULATION, 2023
112,716,598

PHYSICIANS/1000 INH, 2020-2022
0.69

NURSES/1000 INH, 2020-2022
-

LIFE EXPECTANCY, 2022
71.99

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
Lower middle income

HUMAN DEVELOPMENT INDEX RANKING, 2023
100

GDP PER CAPITA (US\$), 2023
3,457.46

HEALTH EXPENDITURE, 2021
179.69

UNIVERSAL HEALTH COVERAGE, 2021
70



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

① EMPOWERMENT OF PEOPLE AND COMMUNITIES

② POLICIES

③ RESEARCH

④ USE OF ESSENTIAL MEDICINES

⑤ EDUCATION AND TRAINING

⑥ PROVISION OF PC

LEVEL OF DEVELOPMENT

① EMERGING

② PROGRESSING

③ ESTABLISHED

④ ADVANCED

Egypt

F Provision of PC (Specialised Services)

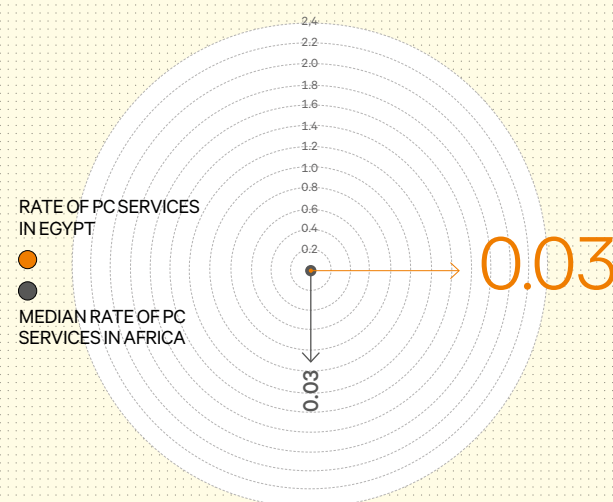
Total number of Specialised PC services

26

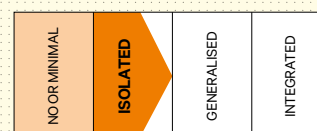
Rate of PC services per 100,000 inhabitants

0.03

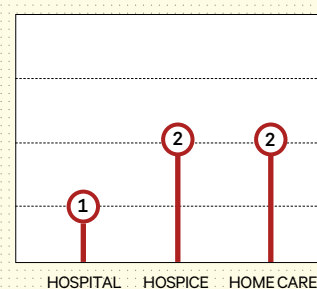
Egypt in the context of African continent



Geographic distribution and integration of PC services



Level of development of different types of PC services



Paediatric PC Services

GEOGRAPHIC DISTRIBUTION AND INTEGRATION



TOTAL NUMBER

5

AF

Egypt

D Use of essential medicines

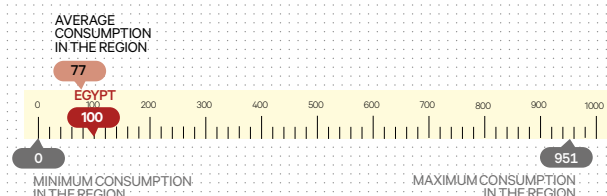


Opioids consumption (excluding methadone)

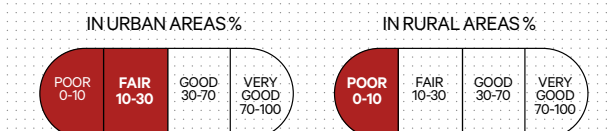
100

S-DDD/MILL INHABITANTS/DAY

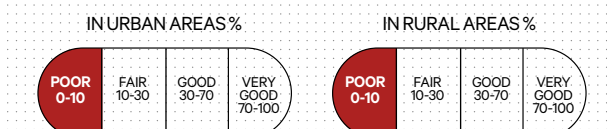
Egypt in the context of African continent



Overall availability of essential medicines for pain and PC at the primary level



General availability of immediate-release oral morphine at the primary level



C Research

PC-related research articles



Existence of PC congresses or scientific meetings



National Association: No.
Consultants: Maged El Ansary;
Tandiar Samir Mosaad Ghattas.

Data collected: From December 2023 to March 2024.

Date validated by consultants: Yes

Endorsed by National PC Association: N/A

Edition: Edited by Atlantes Research Team (University of Navarra, Spain).

E Education & Training

Medical schools with mandatory PC teaching



1/29

Nursing schools with mandatory PC teaching



0/42

Recognition of PC specialty



B Policies

National PC plan or strategy



Responsible authority for PC in the Ministry of Health



Inclusion of PC in the basic health package at the primary care level



A Empowerment of people and communities

Groups promoting the rights of PC patients



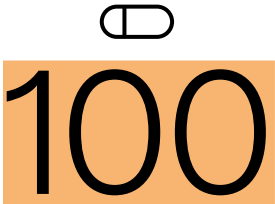






Advanced care planning-related policies



Policies	Ind1 Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.	<div><div>1</div><div></div><div></div><div></div></div> <div>Only isolated activity can be detected.</div>	In Egypt, there are currently no organizations exclusively dedicated to advocating for the rights of palliative care patients, their caregivers, or providing legal support in this area. The Egyptian Society for Regional Anaesthesia and Pain Medicine (ESRAPM) promotes expertise in pain management and regional anaesthesia, indirectly contributing to palliative care. A specialized group focused on supporting palliative care patients and caregivers is under development to address this critical gap. Additionally, two NGO-run hospitals have recognized the need for pediatric palliative care (PPC) and are working to improve services for underserved populations. The JOSAAB Foundation's Hospice Egypt project, primarily targeting adults, advocates for end-of-life care and underscores the broader necessity for comprehensive palliative services in the country.
	Ind2 Is there a national policy or guideline on advance directives or advance care planning?	<div><div>1</div><div></div><div></div><div></div></div> <div>There is no national policy or guideline on advance care planning.</div>	No evidence found.
	Ind3 3.1. There is a current national PC plan, programme, policy, or strategy. 3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.	<div><div></div><div>2</div><div></div><div></div></div> <div>Developed over 5 years ago.</div> <div><div></div><div></div><div>3</div><div></div></div> <div>There is a dedicated section on palliative care contained within another national plan such as for cancer, NC diseases or HIV.</div>	Although palliative care is referenced in National Cancer Strategies, it is not covered by the National Health Insurance. Furthermore, there are no government policies recognizing it as an essential service or a national plan for its development.

3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.	<div><div>1</div><div></div><div></div><div></div></div> <div>Not known or does not exist.</div>	
Ind4 PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.	<div><div>1</div><div></div><div></div><div></div></div> <div>Not at all.</div>	
Ind5 5.1. Is there a national authority for palliative care within the government or the Ministry of Health? 5.2. The national authority has concrete functions, budget and staff.	<div><div>1</div><div></div><div></div><div></div></div> <div>There is no coordinating entity.</div> <div><div>1</div><div></div><div></div><div></div></div> <div>Does not have concrete functions or resources (budget, staff, etc.).</div>	

<p>Ind6</p> <p>Existence of congresses or scientific meetings at the national level specifically related to PC.</p>	<p> 2</p> <p>Only sporadic or non-periodical conferences or meetings related to palliative care take place.</p>	<p>There are only sporadic or non-periodical conferences or meetings related to palliative care.</p>
<p>Ind7</p> <p>Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.</p>	<p> 3</p> <p>Represents a considerable amount of articles published.</p>	<p>A comprehensive scoping review conducted in March 2023, covering publications from 2017 onward, identified 70 peer-reviewed articles on palliative care in Egypt that met the inclusion criteria for this indicator.</p>
<p>Ind8</p> <p>Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.</p>	<p></p> <p>S-DDD PER MILLION INHAB /DAY</p> <p>COUNTRY VS REGION</p> <p>AVERAGE CONSUMPTION IN THE REGION</p> <p>77</p> <p>EGYPT</p> <p>100</p> <p>0</p> <p>MINIMUM CONSUMPTION IN THE REGION</p> <p>951</p> <p>MAXIMUM CONSUMPTION IN THE REGION</p>	

<p>Ind9</p> <p>9.1. Percentage of health facilities at the primary care level in Urban areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.</p> <p>9.2. Percentage of health facilities at the primary care level in rural areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.</p>	<p> 2</p> <p>Fair: Between 10% to 30%.</p> <p> 1</p> <p>Poor: Between 0% to 10%.</p>	<p>Egypt's Essential Medicines List (2018–2019) includes a wide range of palliative care medicines, classified under “Medicines for Pain and Palliative Care”. These include paracetamol (oral, injectable, drops), ibuprofen, acetylsalicylic acid, morphine (injection and 30 mg tablet), codeine, fentanyl (injection and transdermal patch), tramadol, methadone, diazepam, dexamethasone, and ondansetronEGYPT_NEML_2018. Although these medicines are listed nationally, their consistent availability in primary care settings varies. Urban centres such as Cairo and Alexandria have stronger health infrastructure and supply systems, supporting more regular access. In contrast, rural and remote areas face stockouts, transport delays, and limited pharmacy coverage. These factors, along with fewer trained health professionals and partial integration of palliative care into rural services, affect the availability of medicine outside major cities.</p>
<p>Ind10</p> <p>10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</p> <p>10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</p>	<p> 1</p> <p>Poor: Between 0% to 10%.</p> <p> 1</p> <p>Poor: Between 0% to 10%.</p>	<p>Immediate-release oral morphine, in either liquid or tablet form, is not available at the primary care level in Egypt, in both urban and rural areas. Legal restrictions prohibit its possession in primary health care units. For over two decades, the only registered oral morphine formulation has been the 30 mg slow-release tablet, typically accessible only in tertiary hospitals located in major cities. Since late 2014, this formulation has faced critical shortages, leading to its near-total unavailability. Primary health centres and outpatient pharmacies do not stock oral morphine. Currently, tramadol, a weaker opioid, is the only immediate-release oral opioid that is registered and widely accessible across health care settings.</p>

Ind11

- 11.1. The proportion of medical schools with **COMPULSORY** teaching in PC (with or without other optional teaching)
- 11.2. The proportion of medical schools with **OPTIONAL** teaching in PC.
- 11.3. The proportion of nursing schools with **COMPULSORY** teaching in PC (with or without other optional teaching).
- 11.4. The proportion of nursing schools with **OPTIONAL** teaching in PC.

1/29

2/29

0/42

2/42



In Egypt, palliative care education is limited within undergraduate medical and nursing curricula. Among the 29 medical schools nationwide, only one includes compulsory palliative care teaching, while two offer it as an optional subject. Available literature indicates that nursing schools do not include palliative care as a mandatory subject. Nonetheless, two institutions reportedly offer it as an optional component.

Ind12

- Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.



There is no process for specialization for palliative care physicians but exists other types of professional training diplomas without official and national recognition (i.e., advanced training courses or masters in some universities or institutions).

In Egypt, there is no official or nationally recognized specialization process in palliative medicine for physicians. However, alternative informal training options exist.

Ind13

- 13.1. There is a system of specialised PC services or teams in the country that has a **GEOGRAPHIC** reach and is delivered through different service delivery platforms.
- 13.2. Are available in **HOSPITALS** (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.
- 13.3. Free-standing **HOSPICES** (including hospices with inpatient beds).
- 13.4. **HOME CARE** teams (specialised in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.
- 13.5. Total number of specialised PC services or teams in the country.



Isolated provision: Exists but only in some geographic areas.



Not at all.



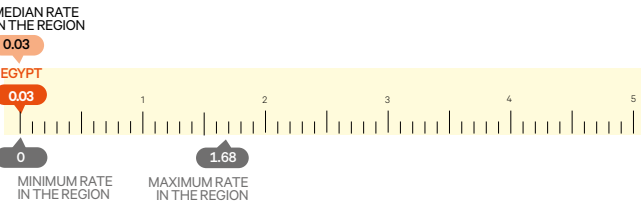
Ad hoc/ in some parts of the country.



Ad hoc/ in some parts of the country.

Egypt has a total of 26 specialized palliative care services, reflecting a service ratio of approximately 0.03 per 100,000 inhabitants (population reference: 2023), with emerging evidence suggesting a gradual increase in their availability nationwide despite limited comprehensive data.

RATE OF SPECIALISED PC SERVICES/100,000 INH



26
← SPECIALISED PALLIATIVE CARE SERVICES

Ind14

- 14.1. There is a system of specialised PC services or teams for **children** in the country that has **geographic** reach and is delivered through different service delivery platforms.
- 14.2. Number of pediatric specialised PC services or teams in the country.



Isolated provision: palliative care specialised services or teams for children exist but only in some geographic areas.

5

PPC TEAMS

In Egypt, specialized paediatric palliative care (PPC) services are available but limited. The Children's Cancer Hospital Egypt (CCHE) in Cairo provides comprehensive PPC, serving approximately 50 children monthly, which constitutes 20% of the hospital's paediatric patients. Additionally, two NGO-affiliated hospitals and three university hospitals in Cairo offer PPC services.