

World Health Organization (WHO) Ladder

The WHO Ladder was first published over twenty years ago (1986) in a handbook called *Cancer Pain Relief*. Since then, the Ladder has guided clinicians all over the world in treating cancer as well as noncancer pain.

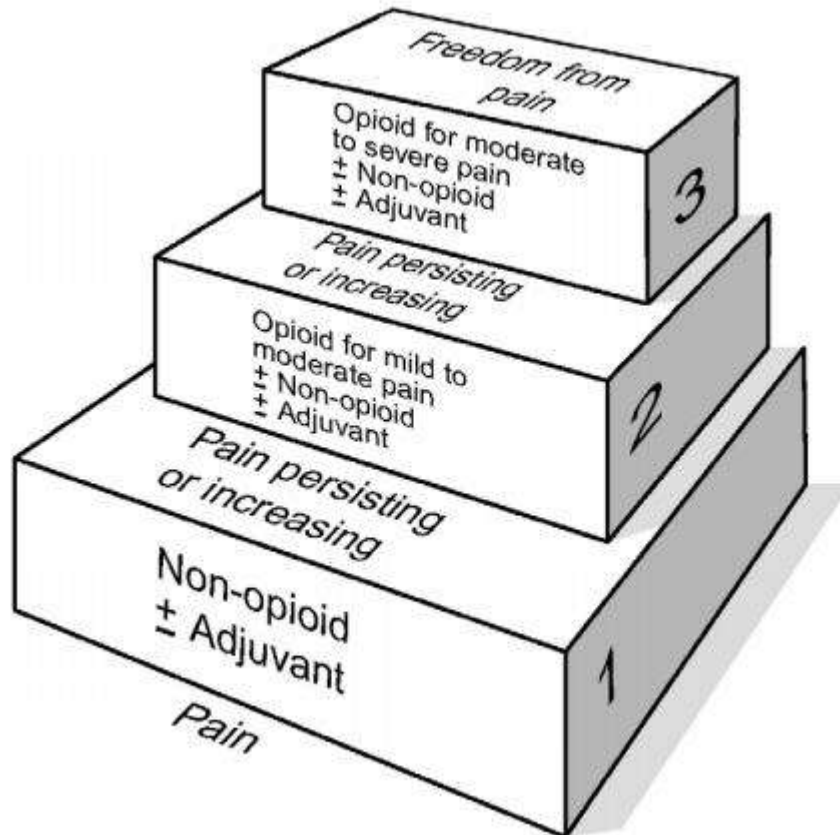


Figure 1. The WHO Ladder (adapted).

The WHO Ladder is part of an overall pain treatment method that centers on five key principles:

- "By Mouth": use the oral route whenever possible, even for opioids
- "By the Clock": For persistent pain, provide medication at regular intervals (around the clock) rather than prn
- "By the Ladder": (Figure 1)

Step 1:

- For mild to moderate pain, start with a nonopioid (e.g., acetaminophen, ibuprofen) and increase the dose, if necessary to the maximum recommended dose.
- Use an adjuvant such as an anti-depressant or anticonvulsant, if indicated
- If the patient presents with moderate or severe pain skip Step 1.

Step 2:

- If or when non-opioids do not adequately relieve pain, add an opioid intended for moderate pain such as hydrocodone (combined with acetaminophen).
- Add or continue adjuvants, if appropriate

Step 3:

- If or when the non-opioid for mild to moderate pain no longer adequately relieves the pain, switch to an opioid that is not combined with another agent such as acetaminophen, and one that is effective for moderate to severe pain (e.g. morphine, oxycodone, hydromorphone).
 - Add or continue adjuvants, if appropriate
- "For the Individual": individualize the treatment plan according to the patient's goals.

Reference:

Cancer Pain Release, a publication of the World Health Organization global communities program to improve cancer and HIV pain control and palliative care. <https://whocancerpain.bcg.wisc.edu/?q=node/86>.

WHO Pain and Palliative Care Communications Program. (2006). *Cancer Pain Release*. Available at: <https://whocancerpain.bcg.wisc.edu/index?q=node/15>