

# INJECTABLE ARTESUNATE NEWSLETTER

Issue 1



Monday 5 May 2014

## Editorial

The World Health Organization (WHO) recommends the use of Injectable Artesunate (Inj AS) for the treatment of severe malaria. The Improving Severe Malaria Outcomes (ISMO) project aims to reduce severe malaria case fatality rates by improving access to, and use of, Inj AS in six high burden malaria countries (Cameroon, two regions of Ethiopia, Kenya, Malawi, 13 states in Nigeria, and Uganda). This will be achieved through programs developed to accelerate adoption of Inj AS over a 3-year period, strengthening the market for Inj AS. Every quarter we will be sharing with you new stories and updates on how the project is progressing. ISMO is funded by UNITAID and involves three different organizations, Medicines for Malaria Venture (MMV), Clinton Health Access Initiative (CHAI) and Malaria Consortium. The teams approach to implementing this project is one that embodies a traditional African philosophy “Ubuntu” - the essence of being human. Ubuntu speaks particularly about our interconnectedness and essentially says that through working together we will make a difference to save more lives.

## Project kick-off meeting in Nairobi

2 - 3 October, 2013

A total of 24 participants (4 from MMV, 6 from Malaria Consortium, 13 from CHAI, and 1 from Missionpharma) attended the meeting in Nairobi. The meeting aimed at providing a common understanding of the project for the different partners and to understand their roles and the required steps to get the project off to a good start. Presentations were made on key milestones and deliverables, and the meeting identified key risks and developed the risk mitigation strategies. The log frame and project plan were discussed in details. Other key issues discussed included advocacy, training, procurement, monitoring & evaluation, reporting and contract requirements. The workshop had teambuilding activities that permitted the members to get to know each other and develop a closer working relationship.



## Nigeria: Training of healthcare workers on Case Management

Q1 2013

The results from a pre-training assessment highlighted the general lack of awareness amongst healthcare workers (HCW) that Inj AS is the treatment of choice for severe malaria. Following this knowledge assessment, the trainings sessions supported by MMV and UNITAID were planned and implemented across six of the thirteen supported states (Abuja, Akwa Ibom, Kaduna, Kano, Lagos, Rivers states).

The facility-based trainings were successfully conducted for 1,250 HCWs (~ 240 secondary health facilities) in early 2013. The impact on HCWs was demonstrated in the post-test scores, which were markedly higher than pre-test scores.

As a result of these activities, the states are already seeing an increase in uptake of Inj AS across hospitals and an improvement in the Quality of Care. Refresher trainings and supervision activities have been planned for 2014 and 2015 to strengthen the skill and knowledge gained during the initial trainings and to ensure continual improvement.



## Cameroon: Introduction of new free treatment policy for severe malaria

31/12/2013

Treatment has been free-of-charge for uncomplicated malaria since 2009. A policy, which now covers all severe malaria treatments was enacted by the President of the Republic in December 2013 and will be fully implemented in 2014.

Recognizing the prohibitive impact of treatment fees, CHAI provided analytical support (on quantifying need and costing the impact), and worked with the government to design a new policy, enabling children under 5 years to access free treatment for severe malaria. The introduction of the policy has received attention from the press and is strongly backed by senior leadership in the government.

The policy will encourage patients to seek treatment using Inj AS and therefore result in a greater switch rate from quinine to Inj. AS.

## Nigeria: MMV and Malaria Consortium partners work with Oyo State to reduce malaria mortality via Inj AS

05/02/2014

The Malaria Consortium team met the state officials to introduce the ISMO project in Oyo state on 5th February 2014. The meeting was attended by the Commissioner for Health, the Permanent Secretary and Directors in the Ministry as well as the Malaria Consortium ISMO team members who included the Regional Coordinator, Project Manager and Senior Technical Officer. During this meeting, the Commissioner for Health of Oyo State, Dr Muyiwa Gbadesin, remarked that the project's approach fits well into the Public-Private-Partnership strategy of the State Government to develop health and other sectors. In his words "The State Government runs the affairs of the State through a popular concept of partnership called 'Ajumose' in Yoruba language meaning 'let's do it together' and this project perfectly fits into this concept". The Permanent Secretary of Oyo State MoH stated that to improve malaria case management the Ministry needed support to build capacity at lower-level facilities, improve the referral system, facilitate the use of new drugs to treat malaria and improve data capture at all levels.



Other beneficiary states have also expressed their readiness to ensure successful implementation of the ISMO project. This initial buy-in by State Governments will ensure continued use of Inj AS after the lifespan of ISMO in 2016.

Picture: ISMO Nigeria team with Commissioner of Health and other management staff of the Ministry

Front row: From left to right: Dr Joghnd Kpamor (ISMO STO) Dr O.A. Iyiola (Permanent Secretary, Oyo State Ministry of Health), Olatunde Adesoro (ISMO PM), Dr Muyiwa Gbadege (Commissioner for Health, Oyo State), Dr Yeka Adoke (ISMO RPC), Dr A Karim-Muhamed (MAPS-State Coordinator), Mrs Jane Onyilo (MAPS-Operation Officer)

Back row; From left to right: Dr T.O Ladipo (Oyo State Malaria Programme Manager), Dr Afolake Adebayo (MAPS-Implementation Officer), Mrs Elizabeth Adeleke (Oyo State Deputy malaria Programme Manager), Dr Sola Akande (Director, Planning Research and Statistics, Oyo State Ministry of Health), Dr Aniefiok Akpasa (MAPS-Implementation Office).

## Ethiopia: Commitments from the Government to improve severe malaria outcomes

28/02/2014

The Federal Ministry of Health (FMOH) in Ethiopia has signed a Memorandum of Understanding (MoU) with Malaria Consortium and MMV to improve severe malaria outcomes.

The agreement was jointly developed by Malaria Consortium, the Charity and Civil Society Agency, and the Resource Mobilization and Health Promotion & Disease Prevention directorates of the Federal Ministry of Health (FMOH). The FMOH is committed to support the ISMO project activities to reduce severe malaria related morbidity and mortality. The project proposal and protocol were drafted in conformity with the country's requirements. The ISMO project recognizes the importance of working in conformity with country-specific needs and requirements. Such an approach promotes program uptake as well as ownership in the country.

## Ethiopia: Micro planning improves quantification of malaria commodities

Accurately quantifying antimalarial commodity requirements in Ethiopia was a challenge because malaria transmission is highly variable and both artemisinin-based drugs and rapid diagnostic tests (RDTs) have a short shelf-life. At the district level, poor quantification has often resulted in either an over-supply and subsequent expiry of antimalarial drugs and RDTs, or their shortages and stockouts.

Micro planning involves use of morbidity data from the previous year to determine drug and RDT requirements in each health facility. Meetings are held at all levels to compile consumption data, which are used for quantification. Once procured, commodities are distributed based on the micro-plans. Implementation of this strategy has proved useful and resulted in reduced wastage and stock-outs and improved estimation of requirements in the absence of a reliable, routine reporting system. Each meeting has also provided an opportunity to review the malaria program and enable the MoH and partners to obtain accurate, district-level data on key coverage indicators that inform future prevention and control activities. The same approach is being adopted to estimate requirements for Inj AS for management of severe malaria.

### News Flash:

Al Jazeera posted a news flash for World Malaria Day all about the ISMO project. The article is introductory text to a documentary filmed about the project in Nigeria, Cross River state which will be aired in June 2014.

See the article: [Injecting hope into the fight against malaria](#)

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