Editorial

Reflecting on last year’s achievements, a BIG thank you to all involved in going the extra mile to support the training activities, to delivering much needed injectable artesunate (Inj AS) to Cameroon, Uganda, Kenya, Ethiopia and Nigeria and to making the difference in saving lives through supporting the scale up of Inj AS. Working with other stakeholders and funders, in collaboration with The Global Fund, a total of 4.6 million vials were ordered and over 3 million vials of Inj AS were shipped to Improving Severe Malaria Outcomes (ISMO) countries in 2014.

This delivery is a key element of the ISMO project, funded by UNITAID, which aims to improve access and use of Inj AS in six high-burden malaria countries (Cameroon, two regions of Ethiopia, Kenya, Malawi, Uganda and 13 states in Nigeria).

As we move forward, we should all feel very proud of our 2014 achievements and continue to challenge ourselves to overcome the hurdles we may encounter this year. From MMV and our consortium partners (CHAI and Malaria Consortium) we would like to wish you all the very best for 2015 and we look forward to working with all of you to support the scale-up of Inj AS and to making a difference…saving lives.

Pierre Hugo
Director, Access and Delivery Africa
MMV

KENYA: First stock of Inj AS received

An emergency order of 210 000 vials of Inj AS, placed by MMV/UNITAID for high endemic counties in Kenya, was received by KEMSA in September 2014. In-country distribution of the consignment, which will cover the need for Q4 2014, started in October 2014. The recent introduction of a devolved health system in Kenya has led to implementing partners collaborating on the mechanism for distributing malaria commodities to counties and health facilities. CHAI continues to provide assistance to the MOH in monitoring the storage and distribution of donated injectable artemesunate, and in strengthening existing systems for managing the supply chain. The first standard order placed by UNITAID in Q3 2014 is scheduled to be delivered in Q1 2015.
Nigeria: First stocks of Inj AS received in 10 states

October, 2014

It was a state of jubilations and celebrations when Medicines for Malaria Venture in partnership with Malaria Consortium and CHAI delivered a total of 90,000 vials of 60mg Injectable Artesunate (Inj AS) for ten states in Nigeria including Oyo, Enugu and Cross River. This was the first delivery of Inj AS funded by UNITAID for treatment of severe malaria under the three year Improving of Severe malaria (ISMO) project. This first stock, representing the quarterly need of all the public hospitals in the ten states was delivered in October 2014 and the delivery was greatly supported by the states’ National Malaria Elimination Programmes.

Although a few public facilities in Oyo and Cross River states have previously received donations of Inj AS, this was the first large scale donation of the drug to cover all public facilities in the two states and the first ever donation of the drug to public facilities in Enugu state. Receiving the consignment for Oyo State, Pharmacist Ewetola representing the Director Pharmaceutical Services, thanked MMV and partners for the good gesture and urged the Pharmacist in the hospitals to ensure rational and judicious use of the drugs.

First batch of Inj AS delivered to Oyo State

Malaria Consortium, the implementing partner in Oyo, Enugu and Cross River, conducted three day training of health workers in selected facilities in the three states to ensure appropriate use of the drug and there are plans to expand the training to all public hospitals in the three states. Following the training and supply of the Inj AS, in-state distribution to the public facilities in the three states commenced. To date, all facilities with trained health workers have received supplies of the drug. Support supervision and monitoring and evaluation activities are on-going at these facilities to ensure support for their appropriate use.

Malawi: MOU signed by CHAI, MoH and MMV

November, 2014

Following agreement on how the UNITAID procured Inj AS will be stored and distributed in-country, the project MOU with Malawi was recently approved and signed by the Secretary of Health. Storage and distribution of UNITAID-procured Inj AS will be overseen by the country’s Central Medical Store. This will enable the country to receive an order of 410,500 vials in mid-Q1 2015, which will help treat patients in Q1 and Q2 2015 (approximately 70% of need). CHAI will continue to work with CMS to strengthen reporting systems and support the NMCP to coordinate distribution of commodities procured by other partners.
Ethiopia: Preparing to receive first stocks of UNITAID donated Inj AS for Oromia and SNNPR

December 2014

The Federal Ministry of Health in collaboration with key malaria stakeholders are preparing to receive 24,000 vials of Inj AS schedule to arrive before the end of the year. The delivery of the drugs follows a vigorous quantification process that was performed by the quantification committees with support from PMI/UNICEF and Malaria Consortium. It was estimated that 24,000 vials (to be supplied by UNITAID) would be sufficient to cover the gap in supply of Inj AS to the states of Oromia and SNNPR in Ethiopia. MMV ensured that the requested drugs are procured and delivered to Ethiopia before the end of the year even when it means air lifting them to reduce the transit time.

In preparation for the receipt of Inj AS, health workers at 69 facilities scheduled to receive the supplied drugs have received additional training on appropriate use of Inj AS for the treatment of severe malaria. In addition, a distribution plan has been set to ensure timely delivery of the drugs to the facilities and support supervision and monitoring and evaluation are planned to ensure proper use of the drugs.

Cameroon and Uganda: First stock of Inj AS received

December 2014

Prior to receiving UNITAID procured commodities in Q1 2015, the Cameroon NMCP, with support from CHAI, has overseen the training of trainers across three regions in Garoua, Buea and Yaounde. 152 trainers and 564 healthcare workers have already been trained and Cascade trainings will be completed across all districts by January 2015. In Uganda, healthcare workers at the HCIV level and above received training on the administration of Inj AS to treat severe malaria. The Uganda NMCP is planning to roll-out a mentorship program with the goal of strengthening healthcare worker expertise on use of Inj AS. The NMCP is also looking to target healthcare workers at the HCIII level in 2015.

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