

INJECTABLE ARTESUNATE NEWSLETTER

Issue 5



Monday, 27th July 2015

Editorial

This editorial is full of new and exciting updates, to keep us informed as the ISMO project moves forward. It is always a very humbling experience to see the doctors and healthcare providers working tirelessly to save lives. It is also very rewarding to know that the ISMO project is making a HUGE difference in the lives of so many people.

Well done to all of you on this great work the past 3 months! We salute you!

Pierre Hugo,
Director, Access and Delivery Africa, MMV

Malawi: MMV and CHAI visit Kamuzu Central Hospital

April 2015

MMV and CHAI held a joint visit to Kamuzu Central Hospital (KCH), one of the four referral hospitals in the country, and Central Medical Stores Trust (CMST) regional stores in Lilongwe. This was part of the ISMO Malawi audit.



A pediatric ward at KCH



A nurse attending to a child with severe malaria at KCH

At KCH, a visit was made to the main pharmacy where Inj AS is stored and dispensed to the wards. Sufficient amounts of Inj AS were found in stock. The team also visited the paediatric ward. Most of the patients in the ward had been diagnosed with severe malaria and were currently on Inj AS treatment. In general, the doctors and nurses gave an overwhelming positive feedback on Inj AS and the project because it has brought a turnaround in the management of severe malaria.



Ethiopia: MMV / UNITAID Team Visit

March 2015

In March this year, a team of representatives from UNITAID and MMV visited Tulu Bolo Hospital and one Community health outpost in Oromia region in Ethiopia, where malaria consortium is implementing the ISMO project. During the visit, the Medical Directors of the facilities briefed the visitors about malaria burden and the benefits they have realised in using Inj AS over Quinine in the management of severe malaria. The directors praised the great work the ISMO project has played in the behaviour change of health workers in the adaptation and use of Inj AS through training. They pointed out that although the national guidelines had been revised in 2012 to Inj AS as the preferred drug for managing severe malaria, health workers persistently used Quinine and trend which is changing after the ISMO training. They also pointed out the support the ISMO project is providing to the federal ministry of health in reducing the stock out of Inj AS at the health facilities.



General Discussions about Severe Malaria



Demonstrating the use of Inj AS at a Pharmacy



Cameroon: M&E and Supervision

May 2015

The introduction of Inj AS in Cameroon for severe malaria treatment has contributed to revolutionize malaria case management. In order to monitor the uptake of this medication, as well as monitor its impact on the mortality of severe malaria cases, 30 sentinel sites (three per region) have been identified. Malaria program data from these sentinel sites will be analyzed monthly. CHAI's support to the functioning of these sentinel sites is greatly welcomed by the NMCP, especially as this support will render them more operational.



Staff of the pediatric unit of Limbe Regional Hospital



Inj. AS stored in Buea Regional warehouse

Supervision of severe malaria activities started in May 2015 with effective utilization of Inj AS. This involved the South West region, in which three health facilities and the Regional Special Fund for Health (regional warehouse) were visited. Health care providers in the facilities visited had been trained and were effectively using this medication. Health care providers were happy with the results obtained, especially in children. At the regional warehouse, Inj AS was well stored at the right temperature and records (stock cards) were well kept.



Nigeria: UNITAID Visits ISMO Cross River State

June 2015

The letters and spirit of the MOU signed between ISMO project partners (MMV and MC) and Cross River State (CRS) Government was re-enacted on Wednesday 10th June, 2015 when UNITAID visited CRS to review the project progress. The team was led by John Cutler the UNITAID Malaria Portfolio Manager. Receiving the ISMO team in his office in Calabar Pharm (Elder), Edem Ita Edem the Permanent Secretary Cross River State Ministry of Health showed the State's appreciation for ISMO's partnership in the management of severe malaria. He also expressed his happiness that the preference for the use of Inj AS for severe malaria management is evidence-driven and backed by policy rather than mere "drug promotion" exercise. He further said that Inj AS has been included in the essential drug list of the State with plans underway to work with medical training institutions in the State on curriculum development for severe malaria management using Inj AS. On his part, John Cutler promised continuous support of UNITAID to the State through ISMO project and sourcing for more partners to support the State.



The team also visited Akpet Cottage hospital, a secondary care facility which serves as referral centre to a cluster of surrounding primary care facilities for management of severe malaria and other complicated medical conditions.

Visit to PS - Front row from right John Cutler (UNITAID); Elizabeth Streat (Malaria Consortium); Phar Edem (PS, CRS MOH); Nikki Charman (PSI). Back row from right: Nkabono Inglass (Malaria Consortium); Mrs Koto E. (MOH); Olatunde Adesoro (Malaria Consortium); Idowu Akanmu (Malaria Consortium); Grace Nakanwagi (Malaria Consortium); Dr Iwara (MOH); Asuquo O. (MOH); Edward Idenu (Malaria Consortium).



Nigeria: Procurement and Supervision

May 2015

In March 2015, CHAI received the second batch of UNITAID donated Inj AS, which was delivered to Central Medical Stores (CMS) in 10 program states. States commenced distribution of the free Inj AS to secondary hospitals in April. Since April, 30,000 vials of Inj AS have been distributed to 70 hospitals. In addition to the donated Inj AS, states continue to make procurement of Inj AS in 2015, using their sustainable drug revolving system. During Q2, CHAI collaborated with state ministries of health to conduct mentoring and supervisory visits to trained facilities across ten program states. CHAI is using this focused approach to identify and address barriers to adoption and appropriate use of Inj AS at the facility level, and to monitor distribution of the UNITAID donation of Inj AS. A notable outcome from the mentoring visits so far has been an increased reporting rate on severe malaria from hospitals. CHAI will continue with the mentorship exercise.





Kenya: M&E and Supervision

May 2015

The CHAI Kenya team has developed an initial supportive supervision checklist in collaboration with the NMCP. The supportive supervision program will specifically track:

- ✓ Whether facility CMEs were conducted as per respective county proposal
- ✓ Receipt of drug donation in respective health facilities
- ✓ Operational level feedback on the switch from quinine to Inj AS for management of severe malaria (successes and challenges).

To date, supervision has been conducted in five counties in the endemic region of the country. Preliminary reports show that the first donation of Inj AS delivered in November/December 2014 reached the health facilities. Similarly all 18 facilities visited, conducted at least one CME per facility by the end of 2014. Of the respondents interviewed, inpatient nurses, clinical officers, and pharmacists had good and up-to-date knowledge of the drug and were able to describe how it is

prepared and administered. In addition, during the supervision, each ward in a facility received the pictured booklet and dosing disc that were developed by the NMCP/CHAI/MMV team and donated by the manufacturer as handy pocket reference guides for health workers who are directly managing patients. These serve as a tool to reinforce the information on Inj AS, as well as a tool for on the job training for those who were not reached during the CMEs. A video with the updated dosage information was also given to the County Malaria Control Coordinators



Injectable artesunate administration user guide booklet, dosing wheel and video.



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