

Improved Access to Medicines through Local Production

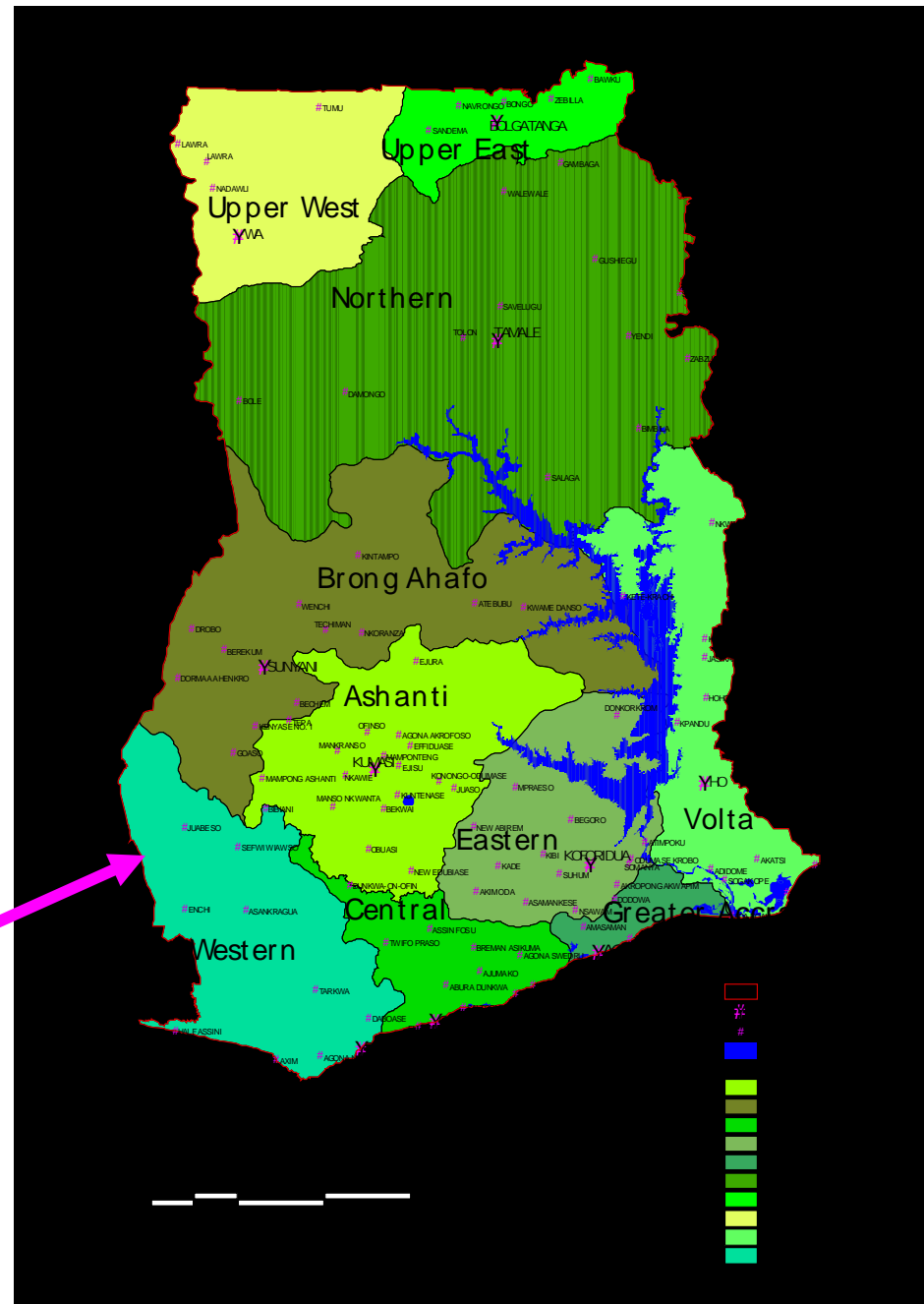
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Introduction

- Access to medicines remain a global challenge; and affect LMICs to varying extents, Ghana inclusive
- Local manufacture of medicines contribute significantly to the improvement of access to medicines through simple supply chains
- The interphase between private sector and public sector to improve access remain a potential yet to be explored fully
- Thus the interlock between access to medicines and the rate of local production; and quality and capacity building are areas to be explored for Ghana

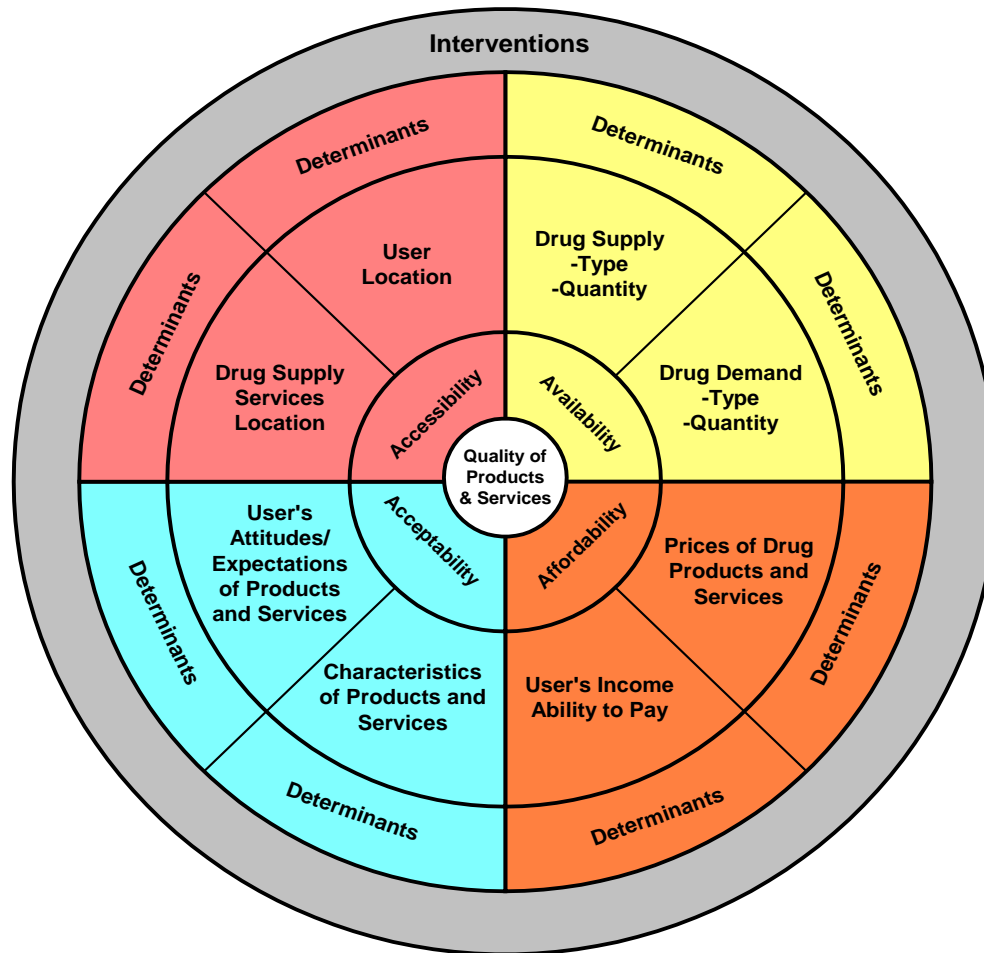
Introduction (2)

- The health challenge in Ghana major factor in poverty
- Many deaths preventable with timely access to appropriate & affordable medicines
- Ghana depends largely on imports from Asia, frequently with long lead times
- Still have challenges with quality of some imports



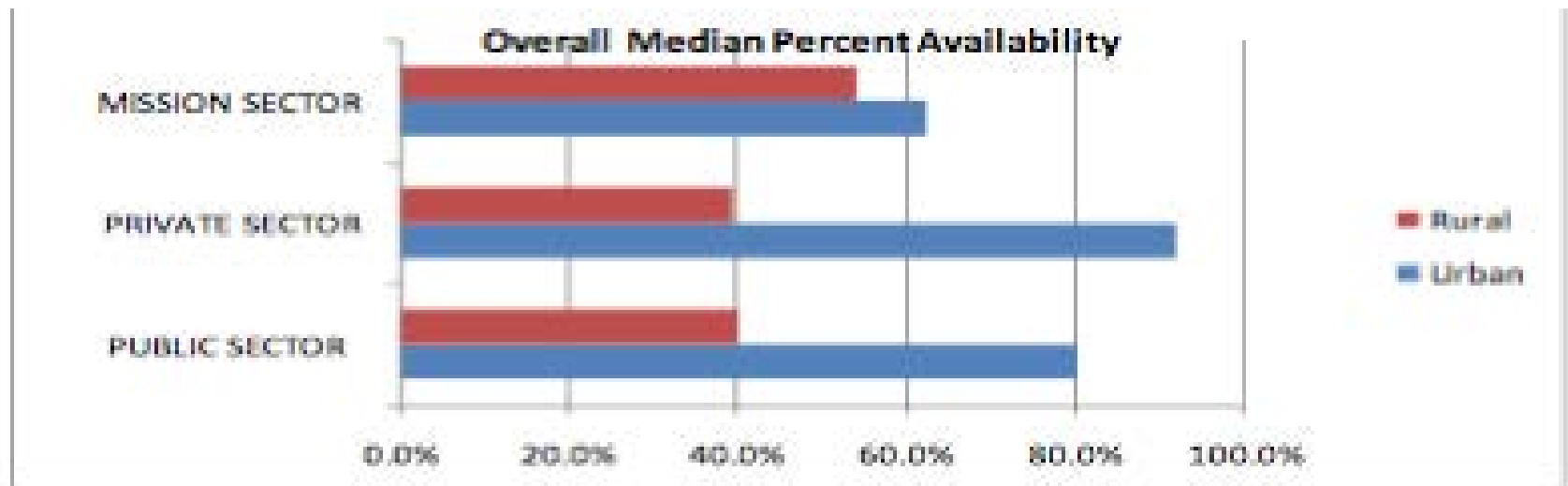
Ghana: Key Health Indicators 2011 (WHO)			 REPUBLIC OF GHANA MINISTRY OF HEALTH
	Ghana	AFRICA Average	
Under 5 mortality rate (probability of dying by age 5 per 1000 live births) <i>(2009)</i>	69	127	
Measles immunization coverage among 1-year-olds (%) <i>(2008)</i>	93	69	
Maternal mortality ratio (per 100 000 live births) <i>(2008)</i>	350	620	
Births attended by skilled health personnel (%)	59	47	
Antenatal coverage (%)	90	74	
Prevalence of HIV among adults aged 15-49 years (%)	1.8	4.7	
Malaria mortality rate (per 100 000 population)	48	94	
Life expectancy at birth <i>(2009)</i>	60	54	
Source: 3/21/2013 <i>World Health Statistics 2011 (WHO)</i>			

Framework for Measuring Access



Source: WHO-MSH (2001)

Availability of Medicines across sectors for 34 selected medicines in 2009



	Public	Private	Mission
Urban	80%(n=15)	91%(n=18)	62.5%(n=4)
Rural	40%(n=15)	39.3%(n=14)	54.2%(n=12)

Affordability

Affordability of Treatment of **Malaria** in Adults across public, private and mission sectors in Ghana

Malaria in adult Artesunate/Amo diaquine	Public Patient		Private Retail		Mission Patient	
	Median Treatm't Price	Days' Wages	Median Treatm't Price	Days' Wages	Median Treatm't Price	Days' Wages
Rural	1.0	0.5	3.0	1.6	2.0	1.1
Urban	0.5	0.3	6.4	3.4	3.6	1.9

Affordability

Affordability of Treatment of **Diabetes** in Adults across public, private and mission sectors in Ghana

Diabetes	Public		Private retail		Mission	
	Median Treatm't Price	Days' Wages	Median Treatm't Price	Days' Wages	Median Treatm't Price	Days' Wages
Glibenclamide						
(Rural)	0.6	0.3	0.6	0.3	0.6	0.3
(Urban)	1.2	0.6	1.2	0.6	1.2	0.6

Affordability

Affordability of Treatment of **respiratory tract infections**
 in Adults across public, private and mission
 sectors in Ghana

Adult resp. infects.	Public		Private Retail		Mission	
	Median Treatm't Price	Days' Wages	Median Treatm't Price	Days' Wages	Median Treatm't Price	Days' Wages
Amoxicillin + Clavulanate						
(Rural)	12.0	6.3	12.6	6.6	12.6	6.6
(Urban)	12.6	6.6	12.6	6.6	12.6	6.6

Reimbursements

	International Reference Price (GHC)	Rural Mission sector		Rural public sector		Rural Private Sector		NHIS	
Medicine Name	IRP	Median price (GHC)	ratio to IRP	Median price (GHC)	ratio to IRP	Median price (GHC)	ratio to IRP	Reimbursement prices 2008	ratio to IRP
Ciprofloxacin	0.0292	0.2000	6.84	0.1750	5.98	0.1700	5.81	0.2	6.84
Clotrimazole	0.0077	0.1650	21.51	0.0584	7.61	0.1075	14.02	0.16	20.86
Diclofenac	0.0055	0.0350	6.40	0.0400	7.32	0.0300	5.49	0.1	18.30
Mebendazole	0.0156	0.4750	30.39	0.3500	22.40	0.7000	44.79	1.2	76.79
Phenytoin	0.0048	0.0800	16.69		-	0.1000	20.86	0.06	12.52
Quinine Injection	0.0768	0.1175	1.53	0.2500	3.26	0.1250	1.63	0.28	3.65
Ranitidine	0.0229	0.1200	5.24	0.1250	5.46	0.1000	4.36	0.2	8.73

Acceptability of locally produced medicines vs. imported

A study on Knowledge, attitude , beliefs and practices study is required:

- Aggressive marketing of imported products
- Low participation of local manufacturers in bidding for International Competitive Bidding
- Poor presentation of bidding documents
- Perception
- Cost

Local Market and Manufacture

Item	Value
.1. ⇨ ⇨ Number of medicines registered	2490
.2. ⇨ List of registered medicines by therapeutic class, patent status, patent expiry and registration dates is publicly available	<input type="checkbox"/> Yes ^{&} <input checked="" type="checkbox"/> No
.3. Total annual market for medicines by value (local cur.) ⁶	360,639,000
.4. ⇨ Market share of generic medicines [branded and INN] by value (%)	NA
.5. ⇨ Market share of medicines produced by local manufacturers by value (%)	30%
.6. ⇨ List of top 20 medicines by value is publicly available	<input type="checkbox"/> Yes ^{&} <input checked="" type="checkbox"/> No
.7. Annual growth rate of total medicines market value (%)	6-8%
.8. Annual growth rate of generic market value (%)	NA

Item	Value
Medicines expenditures	
7.1. ⇒ MOH budget for medicines (local cur.) ⁶	US\$ 62,606,022
7.2. ⇒ Percent MOH health budget for medicines (%)	9.50%
7.3. ⇒ ⇒ Total medicines expenditures (local cur.) ⁶	US\$ 62,606,022
7.4. ⇒ Total medicines expenditures per capita (local cur.) ⁶	2.66
7.5. ⇒ Percent government medicines expenditures (% of total medicines expenditures)	9.50%
7.6. ⇒ Percent private medicines expenditures (% of total medicines expenditures)	NA
Health insurance	
7.7. ⇒ National Health Insurance ¹ (NHI) exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.8. ⇒ If yes, NHI provides at least partial medicines coverage	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.9. ⇒ Social Health Insurance ² (SHI) exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.10. ⇒ If yes, SHI provides at least partial medicines coverage	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.11. ⇒ Proportion of the population covered by NHI or SHI (% of population)	61.29 (2008)
7.12. ⇒ List of medicines reimbursed by NHI or SHI and structure of reimbursement is available	<input checked="" type="checkbox"/> Yes ^{&} <input type="checkbox"/> No

Assessment of local production

- In the above assessment for child specific medicines in Dec 2011:
- It was noted that local manufacturers either produce or have the capacity to produce medicines in most of the therapeutic categories for even some special therapeutic groups e.g. child-specific medicines.
- They also produce or have the capacity to produce medicines containing 20 out of the 26 active pharmaceutical ingredients (APIs) with regard to these child-specific medicines.

Strengthening local manufacturing capacity

- Active engagement with private sector local industry has led to the following two companies
 - Dispersible, masked – taste Zinc sulphate tablets by one company in the country (Quality to be monitored over time)
 - Registered by the Regulatory Authority



Access and Local Manufacture

- Poverty levels make it difficult to purchase medicines – 40% of population earns less than minimum wage
- Potential consequence of TRIPS a barrier to access, high costs of medicines

Interest in Local Manufacture

- Sub-Saharan Africa pharmaceutical manufacturing contributes 25-30% continent's need – concentrated in South Africa (70%) and Nigeria, Ghana & Kenya (20%)
- Very few of these access the substantive amounts available through International Orgs such as The Global fund since yr 2000, when the MDGs introduced – achievement of which health is very important

What are facilitating factors

- Regulatory environment
- Self motivated local entrepreneurs
- UNIDO presence with the Plan of work
- Supportive Government?
- GLZ capacity building work in TRIPS for Africa
 - Most participants moved on

Interest in Local Manufacture

- Global recession threatens supply of foreign-aid financed import
- Pharmaceutical sector strategic in affecting health outcomes positively
- Tight regulations and quality control better enforced when supplier in close proximity to end-user
- Economic growth
- Easier continuous supply

Challenges

- Translating policies into action
- Human capital
 - In service training for industry
 - Middle level skill training
- Financial Capital
- Technology transfer
- Effective and efficient partnerships
- Dealing with substandard and counterfeits

Concluding Remarks

- However,
 - only 27% of these medicines are produced locally in the required dosage form and strength,
 - while there is local capacity to produce a further 38%.
 - Overall, local manufacturers have the potential to produce 65% of the targeted child-specific medicines.

Concluding Remarks

Indications:

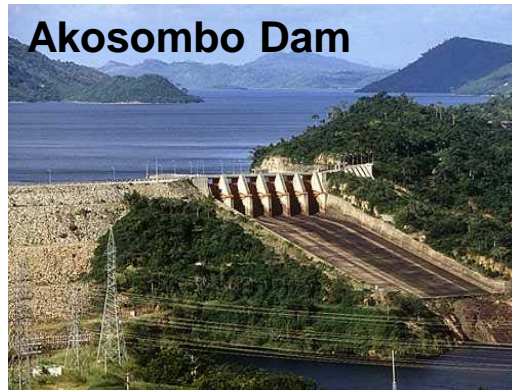
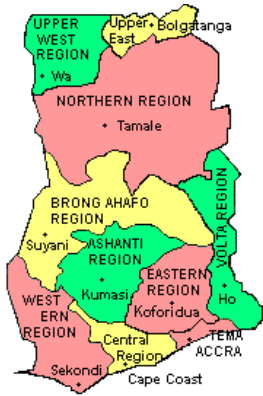
- Need for specific interventions designed
 - To build capacity in local manufacture for other ranges of innovative products
 - To encourage investment into new and existing product lines
 - To promote market access across the sub region
 - To promote PPPs geared towards sustainable access to medicines with public health interest and private sector interests all aligned properly around one forum

Concluding Remarks

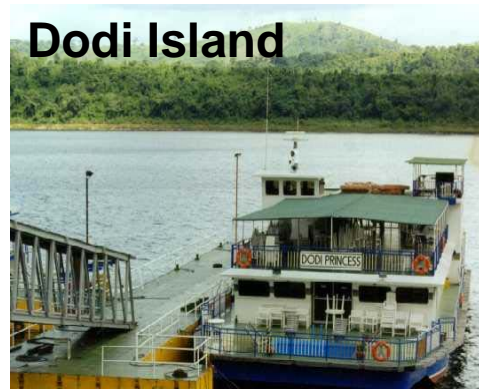
- Medicines are weapons to fight diseases
 - Poverty
- Your weaponry must be at arms length
 - Eg the H1N1
- The argument for access to medicines using Local production is as relevant today as it was in 10 years ago

ABOUT

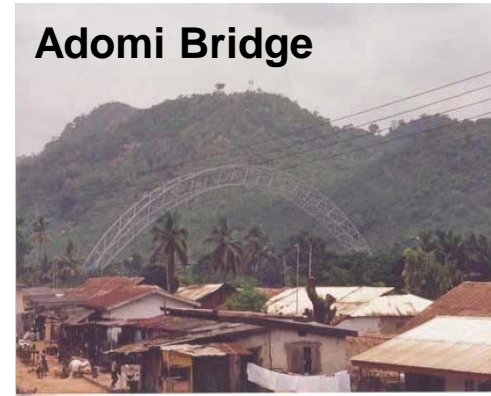
THANK YOU



Akosombo Dam



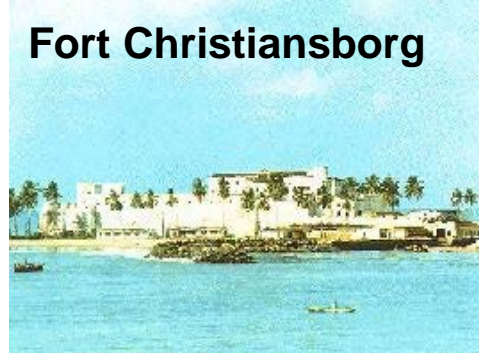
Dodi Island



Adomi Bridge



Cape Coast Castle



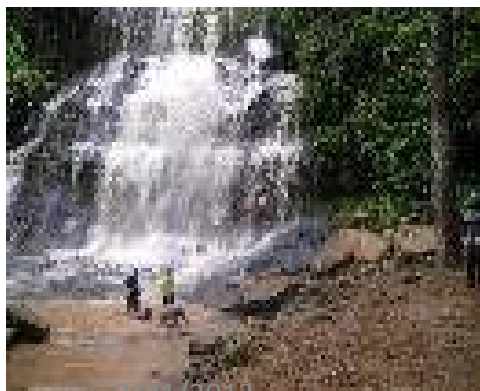
Fort Christiansborg



Lake Bosomtwi



Elmina Beach



5/21/2013

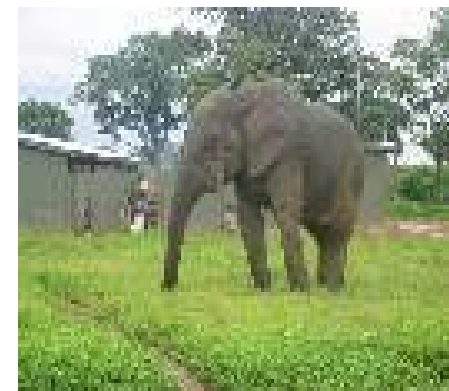
Kintampo water falls



Labadi Beach



Canopy walkway, Kakum



Mole Park

Thank you