RBM Case Management Working Group, Geneva

Severe Malaria: Supply and demand for injectable artesunate,

Defeating Malaria Together
12th, June 2012
Strong collaboration between MMV and Guilin

- **MMV supported Guilin:**
  - During WHO prequalification process
  - Artesun bundled package (artesunate + sodium bicarbonate + saline solution)
  - Product range extension to 30mg, 60mg and 120mg Artesun strength
  - Materials development
Adequate production capacity to support uptake of injectable artesunate

Production capacity at Guilin

30 million

11 m.

8 m.

Source: MMV commissioned manufacturing capacity assessment of Guilin by Quintiles (Feb 2012)

New facility with 2 additional lines, potentially three fold increase in production capacity

Current capacity on existing equipment: single shift / 30 working days/month

Current capacity on existing equipment: single shift / 22 working days/month

Guilin orders for 2011 = 2 m. vials
Supply of WHO PQ injectable artesunate

2 million vials* of WHO-prequalified artesunate injection delivered in 2011

*510,000 treatment courses for young children
Successful collaboration around severe malaria

- Work closely with
  - WHO
  - NMCPs
  - MSF
  - CHAI
  - Swiss TPH
  - Mahidol-Oxford University

- Stakeholders meeting in Geneva
Areas of implementation focus and geographical coverage – Severe malaria

- Encouraging policy
- Supporting Implementation
- Training
- Monitoring
Encouraging policy change: Situation analysis

- Injectable artesunate is on the severe malaria guidelines in 7 of the 20 top burden countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Burden</th>
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<tbody>
<tr>
<td>- Uganda</td>
<td>11.2%</td>
</tr>
<tr>
<td>- Nigeria</td>
<td>8.3%</td>
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<tr>
<td>- Niger</td>
<td>4.9%</td>
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<tr>
<td>- Liberia</td>
<td>3.5%</td>
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<tr>
<td>- Kenya</td>
<td>3.4%</td>
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<tr>
<td>- Malawi</td>
<td>2.3%</td>
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<tr>
<td>- Mozambique</td>
<td>1.5%</td>
</tr>
<tr>
<td>- Ethiopia</td>
<td>0.8%</td>
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<table>
<thead>
<tr>
<th>Country</th>
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<tbody>
<tr>
<td>- DRC*</td>
<td>12.4%</td>
</tr>
<tr>
<td>- Mali</td>
<td>9%</td>
</tr>
<tr>
<td>- Tanzania (M)</td>
<td>8%</td>
</tr>
<tr>
<td>- Zambia</td>
<td>3.4%</td>
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<tr>
<td>- Angola</td>
<td>2.8%</td>
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<td>- Burundi</td>
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</thead>
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<tr>
<td>- Burkina Faso</td>
<td>5.7%</td>
</tr>
<tr>
<td>- Ghana (inj. AS alternative)</td>
<td>5.1</td>
</tr>
<tr>
<td>- Sudan (N)</td>
<td>2%</td>
</tr>
<tr>
<td>- Benin</td>
<td>0.8%</td>
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</tbody>
</table>

* DRC guidelines drafted

**Regular update of status needed**

**Anticipated action needed before program set up**

**Confirmation is needed**

Source: WHO, PMI, GF and MMV
Development of tools to facilitate roll-out

- **Advocacy document**
- **Funding calculator**
  - Co-developed with MORU
  - Estimate funding required and number of additional lives saved
Training materials to facilitate correct use

- Developed by MMV in collaboration with WHO GMP, Mahidol-Oxford University, NMCP (Kenya and Uganda), MSF, CHAI, and Guilin
- Tested in Kenya and Uganda
- Dosing chart still not finalized
### MMV Inj-AS country projects to support policy change & implementation

#### Nigeria

- **Objectives:**
  - Accelerate the adoption and uptake of injectable artesunate

- **Area:**
  - 6 states (ca. 25% of national population)

- **Partners:**
  - Ministry of Health (Federal and states), CHAI

- **Key activities:**
  - Advocacy and implementation support
  - M&E to inform scale-up

- **Status:**
  - MoUs signed with 6 states;
  - Taskforce, AdBoard set-up, Lagos state procuring

#### DRC

- **Objectives:**
  - 3 health zones

- **Area:**
  - 3 health zones

- **Partners:**
  - Ministry of Health, Swiss TPH, MSF, SANRU

- **Key activities:**
  - Update policy
  - Implementation pilots to assess feasibility and inform national roll-out

- **Status:**
  - NMCP severe draft guidelines updated to include Inj-AS

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*Note: Nigeria and DRC account for 21% of the 5.6 million cases of severe malaria cases worldwide*