



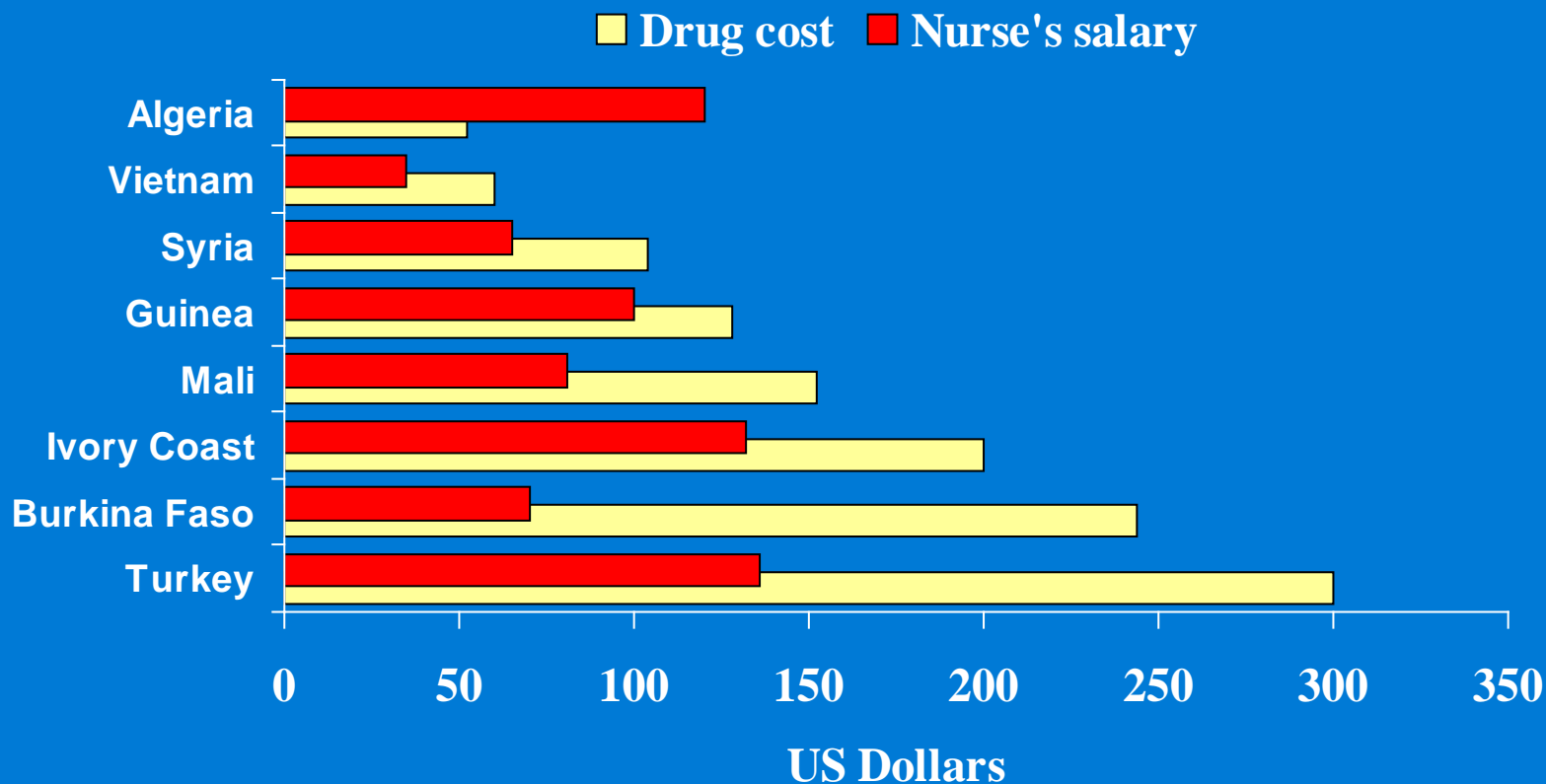
# Access to asthma medicines in resource poor countries

ISAAC Symposium  
Auckland, 27th January 2011



# Affordability of asthma drugs

## *Moderate persistent asthma, one year in 1998*

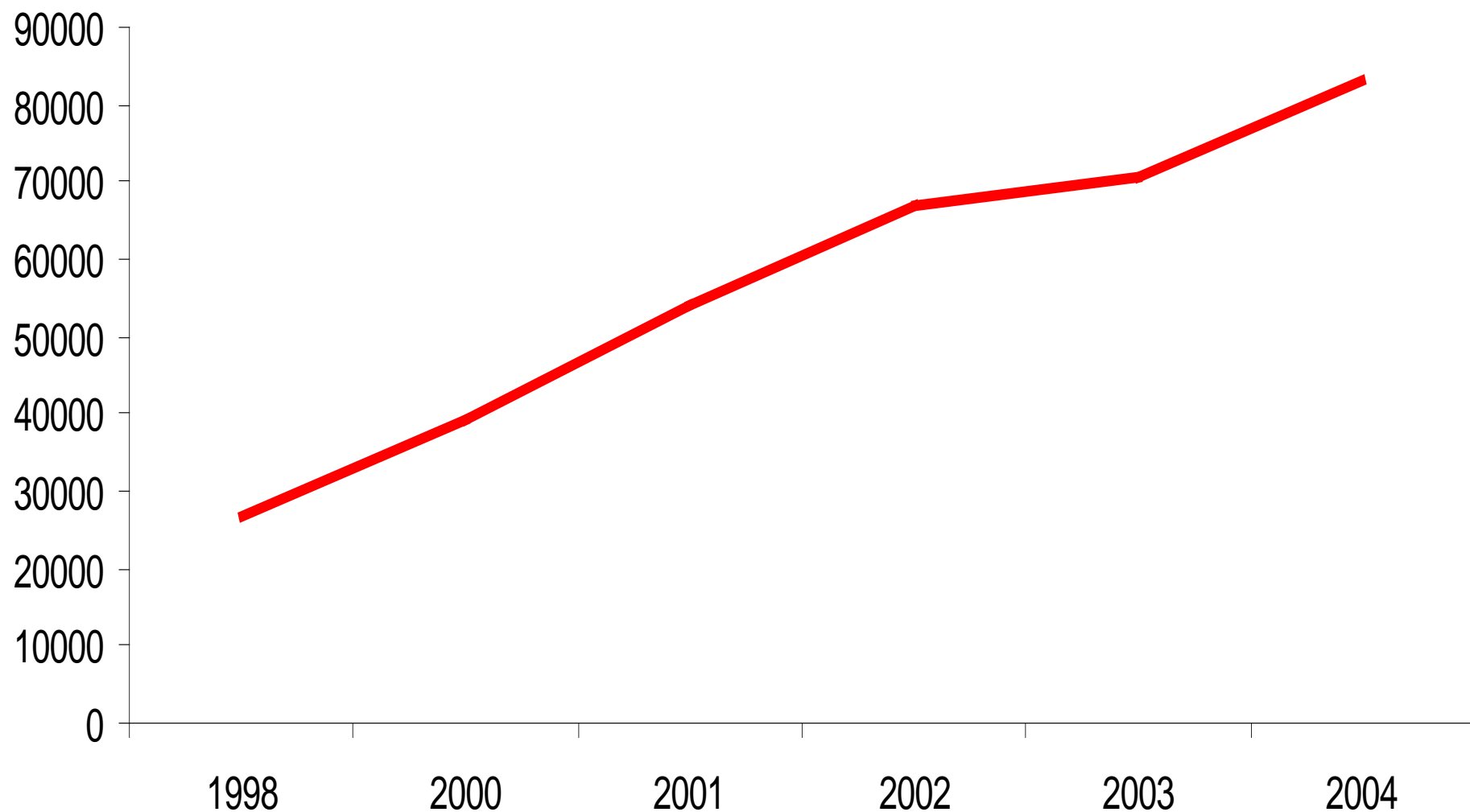


# Main challenges identified for asthma management

- Lack of political commitment: priority to infectious diseases, no national guidelines
- Lack of organisation of services and trained personnel: patients treated only for attacks
- **Inhaled steroids not affordable for the majority of patients**

# Trend of emergency visits for asthma attacks

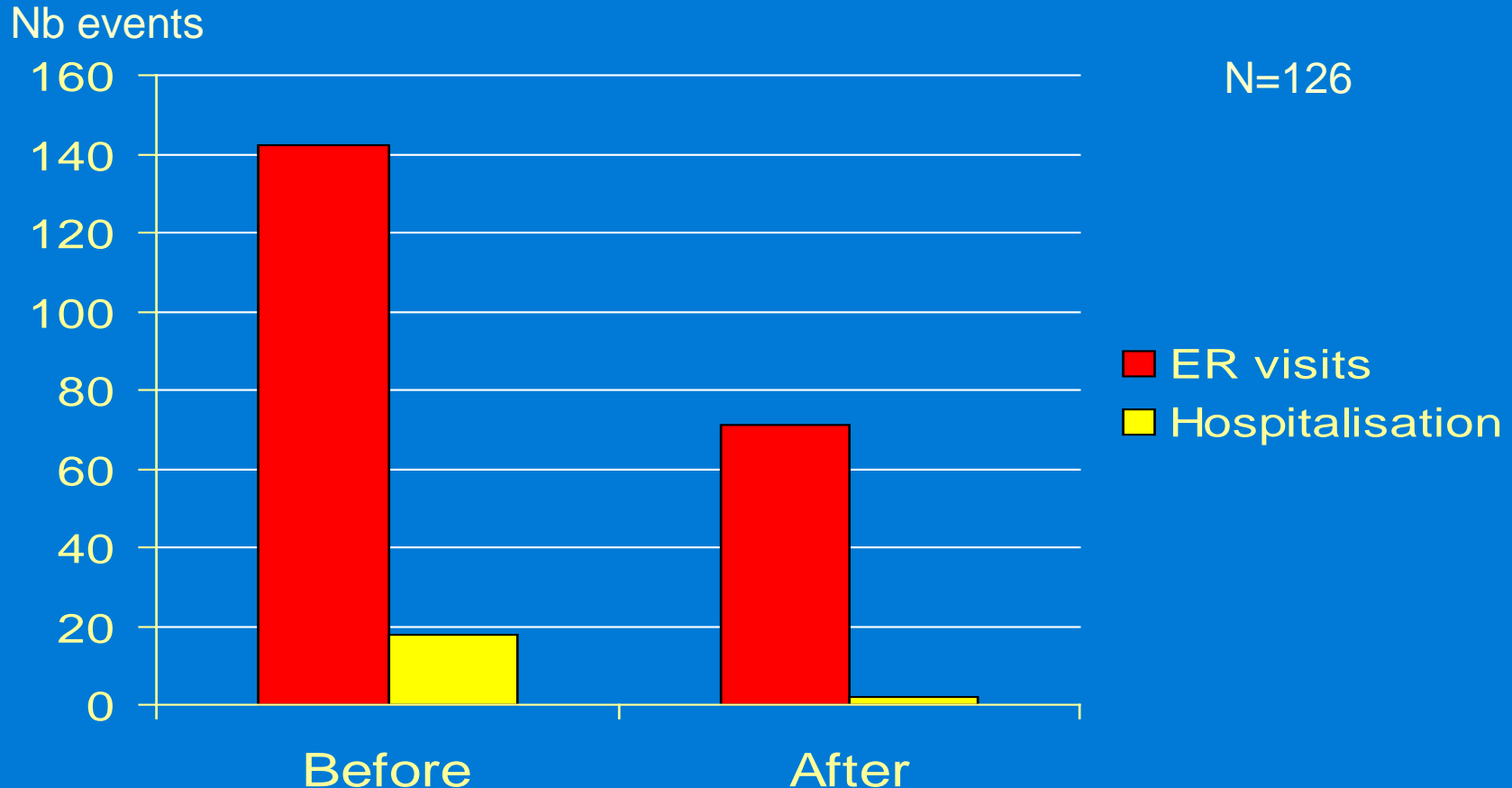
## *Sudan, 1998-2004\**



\* ***Sudan Ministry of Health Statistics***

# *Evaluation of quality of care*

## *Implementation of The Union's Asthma Guide*



• Outcome after one year: *The Union Guide in Algeria, Morocco, Syria and Vietnam*  
*Ait-Khaled N et al. Int J Tuberc Lung Dis. 2006 ;10(8):911-6*

Without action : drugs will be for  
rich patients and their animals!!



*New Zealand. Sunday Star. Times, January 4,2004  
Photo : Kevin Stent*

# Addressing identified challenges

## The Asthma Drug Facility

The Union created the Asthma Drug Facility (ADF) with the following mission:

- to provide affordable access to quality assured essential asthma medicines for low- and middle-income countries
- to promote a quality improvement package for the diagnosis, treatment and management of asthma



# ADF Strategy

1. Promote use of a quality improvement package for the diagnosis, treatment and management of asthma in the general health services
2. Use pooled procurement strategies to lower prices of medicines
3. Target populations with large numbers of patients unable to afford asthma medicines
4. Increase awareness that disability and poverty caused by asthma can be reduced
5. Be an efficient, transparent, sustainable, accountable and responsive medicine supply system



# How does the ADF work?

- ADF organises qualification of manufacturers and products, since asthma inhalers are not part of the WHO Prequalification Programme
- ADF establishes contracts with selected manufacturers for qualified products and proposes these products to countries, organisations, programmes
- Countries purchase generics at affordable prices
- ADF provides training materials and an information system

*Additional services available at The Union:*

- Training courses and technical assistance



# ADF Products

## Main products:

- Beclometasone 100 µg/puff, 200 doses, HFA inhaler\*
- Salbutamol 100 µg/puff, 200 doses, HFA inhaler\*

## Alternative corticosteroids:

- Budesonide 200 µg/puff, 200 doses, HFA inhaler\*
- Fluticasone 125 µg/puff, 120 doses, HFA inhaler

*\*On the WHO Essential Medicines Updated List 2010*

# ADF Quality Assurance System

- Based on WHO Model Quality Assurance System for Procurement Agencies, WHO norms and standards and International Pharmacopoeias
- Qualification includes two main steps:
  - Qualification of manufacturer/site (dossier + site visit)
  - Qualification of each product (dossier + sample)
- Qualification of product-manufacturer pairs
- Quality agreement signed by supplier to respect specifications approved by ADF
- Preshipment Inspection and random quality control prior to delivery time

# ADF Product Prices for 2010/2011

Additional costs: transport, insurance, preshipment inspection and 10% fees for ADF services

*(A new qualification and tender process is currently underway and new contracts will be established in March/April 2011)*

Product	Primary Supplier (Country)	Price per unit FCA (Euro)
Beclometasone 100µg/puff 200 doses, HFA inhaler	Beximco (Bangladesh)	1.07
Salbutamol 100 µg/puff 200 doses, HFA inhaler	Beximco (Bangladesh)	0.83
Budesonide 200µg/puff 200 doses, HFA inhaler	Cipla/Medispray (India)	2.69
Fluticasone 125µg/puff 120 doses, HFA inhaler	Cipla/Goa (India)	3.23

# ADF Client Criteria

## The client must agree to:

- Take the responsibility for the importation of medicines into the recipient country
- Sell the medicines with a minimal mark-up or to provide them free of charge to patients
- Not re-export or resell these medicines
- Make a full payment in advance to ADF (by bank transfer or letter of credit from a bank)

# ADF Monitoring Requirements

## The client is required to:

- use the products supplied according to international guidelines for diagnosis and treatment
- identify an individual responsible for providing monitoring reports to the ADF
- submit routine monitoring reports, as specified in the Technical Agreement with the ADF

# Minimum Requirements for ADF monitoring reports

- Declare which classification is used for symptoms (intermittent, mild, moderate, severe or uncontrolled, partly controlled, controlled).
- For any patient treated with corticosteroids supplied through ADF, provide data collected at initial visit and at yearly monitoring visit
  - Lung function evaluation (in % of predicted PEF, using peakflow meter or spirometry)
  - Nb of puffs of corticosteroid prescribed
  - Number of emergency visits and hospitalisations

# ADF Clients

## Countries that have already received their orders

- Pilot Projects in Benin (NTP), El Salvador (NTP), Sudan (Epi-Lab)
- Kenya (KAPTLD)
- Burundi (NTP)



## Current orders

- Vietnam (CHREDI)

## Potential clients

- PAL countries receiving funds from Global Fund
- Other contacts through asthma, TB, NCD networks



# Revolving Fund: a sustainable solution for asthma

- One of the methods for financing asthma medicines is a **Revolving Drug Fund (RDF)** in which, after an initial capital investment, medicine supplies are replenished with monies collected from the sales of medicines.
  - The initial capital may be a donation of asthma medicines paid by donors and purchased through ADF
  - Medicines are sold to patients in health structures at a price including the cost of the medicines delivered in country + a small additional margin (to cover local charges and increase the revolving fund progressively)
  - The money is then collected at central level and used again to place a new order to ADF

# Examples of prices in Benin, El Salvador, Kenya and Sudan

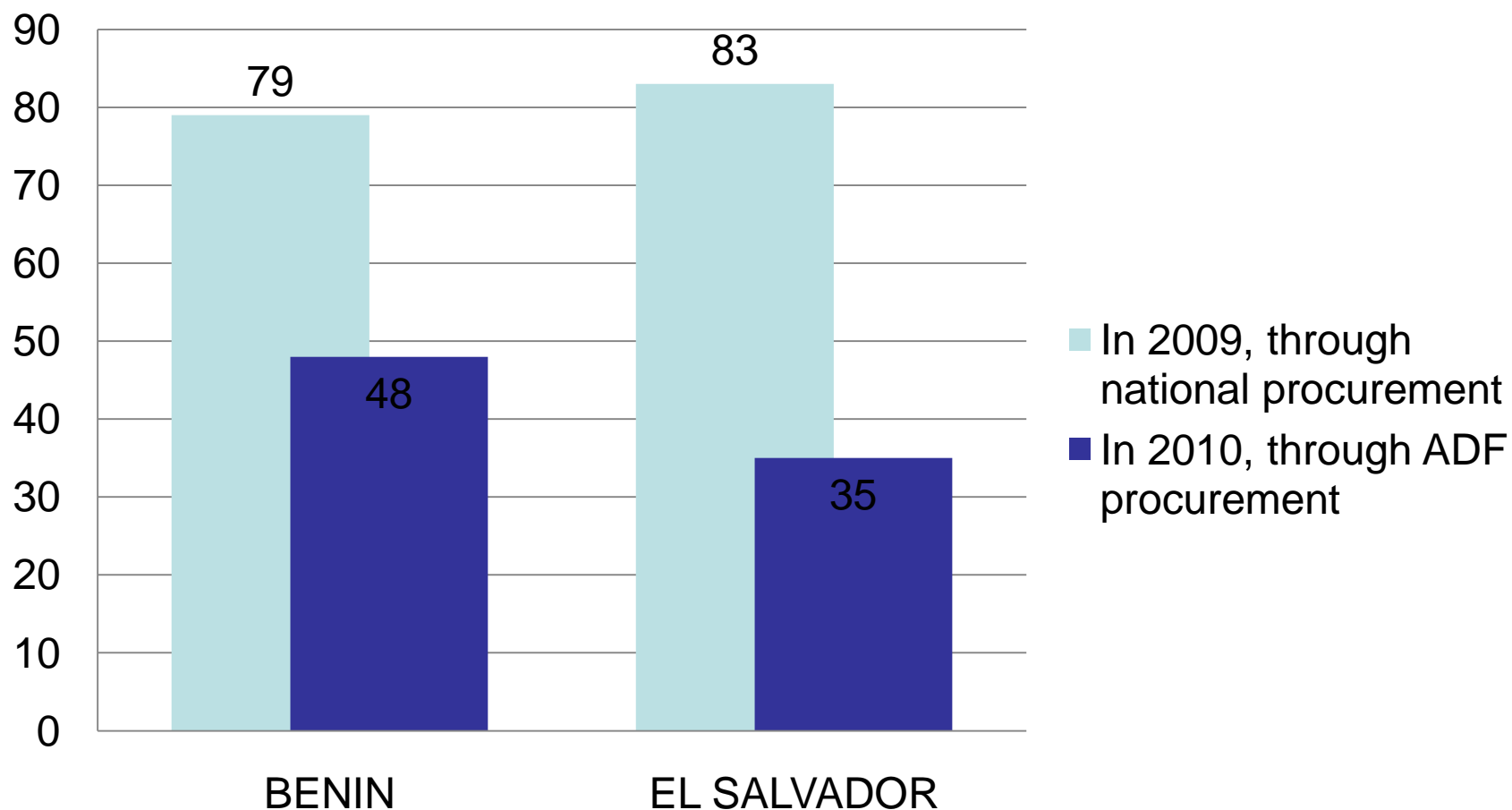
Products	Unit Price for the NTP in Benin	Unit Price for the patient in Benin*	Unit Price for the MoH in El Salvador	Unit Price for the patient in El Salvador	Unit Price for KAPTLD in Kenya	Unit Price for the patient in Kenya**	Unit Price for Epi-Lab in Sudan	Unit Price for patient in Sudan***
Beclometasone 100µg/puff 200 doses, HFA inhaler	1.90□	2.13□	1.59□	For free	1.60□	1.84□	1.63□	1.93□
Salbutamol 100 µg/puff 200 doses, HFA inhaler	1.50□	1.68□	1.23□	For free	1.25□	1.44□	-	-

\*12% margin applied in Benin

\*\* 15% margin applied by KAPTLD

\*\*\* 18% margin applied for Sudan

# Reduction in yearly cost for a case of severe asthma when purchasing through ADF (in euros)



# **COST SAVING FOR COUNTRIES**

*that use standardised, long-term management of asthma and avoid unnecessary hospitalisation*

	<b>Benin</b>	<b>Sudan</b>	<b>El Salvador</b>
<b>Cost of hospitalising a patient for 2 days 4 times a year</b>	269€ 372US\$	585€ 808US\$	852€ 1176US\$
<b>Cost of 1 year of affordable essential asthma medicines for a patient with severe asthma</b>	48€ 66US\$	40€ 55US\$	35€ 48US\$
<b>Saving in hospitalisation costs</b>	221€ 306US\$	545€ 753US\$	817€ 1128US\$

This preliminary calculation uses data from one main hospital in each country. It shows the cost saved by the health services if hospitalisation is prevented. It does not show what the patients and their families would save (indirect costs such as transport, workdays lost etc).

# Asthma Drug Facility

Improving the management of asthma patients  
in low- and middle-income countries



# Contact

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