# Access to Visceral Leishmaniasis treatment in East Africa: WHO perspective

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## **Outline**

- Current situation
- Perspectives for 2019
- 2020 and beyond
- Not just about procurement: EML



### **Current situation**

- WHO is procuring SSG-PM for Ethiopia, South Sudan and Sudan with funds from DFID through the KalaCORE project
- WHO procures SSG-PM for Djibouti, Kenya and Somalia
   with funds received from Gilead Sciences
- WHO has expanded the donation of AmBisome to Somalia and Uganda in agreement with Gilead



# Perspectives for 2019

 WHO expects to supply Ethiopia, South Sudan and Sudan for the whole 2019 with the funds from DFID (KalaCORE project until March-2019)

Rest of East Africa remains the same assuming that
 Gilead will approve the third year instalment



# 2020 and beyond

- Possible scenarios for SSG-PM:
  - 1) WHO continues to receive financial support from DFID and is able to procure on behalf of Ethiopia, South Sudan and Sudan:

2) Other organizations receive financial support from DFID to take over procurement from WHO in ETH-SSD-SUD:

3) No donor is interested in supporting procurement in ETH-SSD-SUD on behalf of MOHs:



# 2020 and beyond (cont.)

- Possible scenarios for AmBisome:
  - 1) WHO continues to receive AmBisome through the donation programme:

2) Other organizations receive funds to procure AmBisome: (



3) No support to donate/procure AmBisome on behalf of MoHs:





## Not just about procurement: EML

## Essential medicines and health products

#### http://apps.who.int/iris/bitstream/handle/10665/27 3826/EML-20-eng.pdf?ua=1

#### WHO Model Lists of Essential Medicines

The WHO Model Lists of Essential Medicines has been updated every two years since 1977.

The current versions are the 20<sup>th</sup> WHO Essential Medicines List (EML) and the 6<sup>th</sup> WHO Essential Medicines List for Children (EMLc) updated in March 2017.

The 2017 Expert Committee on the Selection and Use of Essential Medicines

6.5.2 Antileishmaniasis medicines		
amphotericin B	<b>Powder for injection:</b> 50 mg in vial (as sodium deoxycholate <b>or</b> liposomal complex).	
miltefosine	Solid oral dosage form: 10 mg; 50 mg.	
paromomycin	<b>Solution for intramuscular injection:</b> 750 mg of paromomycin base (as the sulfate).	
sodium stibogluconate <b>or</b> meglumine antimoniate	<b>Injection:</b> 100 mg/ mL, 1 vial = 30 mL <b>or</b> 30%, equivalent to approximately 8.1% antimony (pentavalent) in 5- mL ampoule.	



## Not just about procurement: EML (cont.)

#### 6.4.2 Antileishmaniasis medicines

pentamidine isethionate sodium stibogluconate

inj (PFR) 200mg deep IM inj 100mg/mL antimony IV/IM

## **Uganda**

#### AI.404 Antileshmania Medicines

1. Amphotericin B

Lozenges, 10mg

Liposomal Injection, 10mg/ml, 50mg/vial

Oral suspension, 100mg/ml

Powder for injection, 50mg/vial

**Ethiopia** 

2. Hexadecyl- Phosphocholine Capsule, 10mg, 50mg

3. Pentamidinelsethionate Powder for Injection, 200mg, 300mg/vial

4. Paromomycin Capsule, 250mg

Injection, 375mg/ml, (Sulfate)

2ml/ampoule

5. Sodium Stibugluconate Injection, 100mg/ml

http://www.who.int/selection\_medicines/country\_lists/en/



# Not just about procurement: EML (cont.)

6.5.2 Antileishmaniasis medicines				
6.5.2.1	Amphotericin B	PFI	50mg vial (as sodium deoxycholate)	
6.5.2.2	Paromomycin <sup>92</sup>	Injection solution (IM)	375mg base/mL (as sulphate) (2mL amp)	
6.5.2.3	Sodium stibogluconate <sup>93</sup>	Injection	100mg/mL (100mL vial)	

Kenya

#### Sudan

6.5.2 Antileishmaniasis medicines		
Amphotericin B	powder for injection, 50 mg in vial	
Pentamidine	powder for injection, 200 mg, 300mg (isetionate) in vial	
Sodium stibogluconate	injection, 33%, equivalent to approx. 10% antimony , in 30-ml vial	

http://www.who.int/selection\_medicines/country\_lists/en/





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Job Opportunities

The Ministry of Health is a government body set up with the mandate of stewardship and leadership of the health sector. The Ministry of Health is responsible for policy review and development, supervision of health sector activities, formulation and dialogue with health development partners, strategic planning, setting standards and quality assurance, resource mobilization, advising other Ministries, departments and agencies on health-related matters, and ensuring quality, health equity, and fairness in contribution towards the cost of health care.

**Our Vision** is to have a healthy and productive population that contributes to socio-economic growth and national development.

**Our Mission** is to provide the highest possible level of health services to all people in Uganda through delivery of promotive, preventive, curative, palliative and rehabilitative health services at all levels".

Our role as the Ministry of Health also includes; mobilization of resources such as human resources, health infrastructure medicines and other health supplies health data and information. The Ministry of health handles capacity development and technical support supervision; provision of nationally coordinated services including health emergency preparedness and response, epidemic prevention and control, coordination of health research,

#### NEWS AND UPDATES

National TB Conference 2018: Stakeholders call for increased domestic funding towards Tuberculosis

Date: 15 Aug, 2018

Uganda commended for efforts In the fight against Hepatitis B

Date: 09 Aug, 2018

MINISTRY OF HEALTH
LAUNCHES NATIONAL DAY OF
PHYSICAL ACTIVITY

Date: 12 Jul, 2018

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