

Highlights of GDF Mission to Malawi, August 2018

The Stop TB Partnership/ Global Drug Facility (STB/GDF) together with the World Health Organisation (WHO) Green Light Committee (GLC) conducted a joint Technical Assistance (TA) mission to Malawi on 13th – 23rd August, 2018. The GDF mission was aimed at supporting the National Tuberculosis Control Programme (NTCP) and in-country partners to improve supply and logistics management capacity for TB medicines and diagnostics.

Impressive progress in adopting new medicines and tools in line with WHO guidance was observed. The new optimized paediatric formulations and new DR TB medicines (Bedaquiline and Delamanid) have been rolled out.

The [QuanTB tool](#) has been adopted for quantification and as Early Warning System ([EWS](#)) to prevent stock outs and expiries of TB medicines. The TA mission provided further capacity building to NTCP on optimizing the use of the tool to make key decisions in TB medicines supply management.

The GDF team worked with GLC and NTCP to plan for the transition to the new DR-TB treatment regimen following the WHO August 17, 2018 [Rapid Communication](#) on Key changes to treatment of multidrug- and rifampicin-resistant tuberculosis (MDR/RR-TB). As part of this support, the country developed new regimens and put in place key steps and timelines for the transition. Quantification and supply plan for the country requirements for the period 2018-2020 was done and aligned to the new regimens.

NTCP was also advised on managing the pending orders to minimize wastage during the transition.



Joint GDF/GLC Team conducting review with the Malawi NTCP/NTRL team on diagnostics

Implementation of active drug safety monitoring (aDSM) was ongoing, with tools and roadmap already in place and staff already trained. The Pharmacy, Medicines and Poisons Board routinely conducts batch testing for medicines entering the country and has fast track registration and waiver system for medicines of public health need, for example Bedaquiline.

One of the challenges observed, however, was low uptake of TB/HIV collaborative services mainly Isoniazid Preventive Therapy (IPT) and Rifabutin based treatment regimen for HIV patients with TB. This has resulted to overstock of Isoniazid and expiry of Rifabutin. A meeting was held between the



mission team, NTCP, HIV programme and partners to deliberate on how to address the bottlenecks that constrain the uptake of these services.

The mission ended with debriefing sessions with Ministry of Health SMT (senior management team), WHO country representative, NTCP and partners.