

Figure 2: Study countries

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CDT-Africa is a World Bank supported Africa centre of excellence that works to build endogenous capacity for local production of medicines (drugs, vaccines, diagnostics). The Centre is based at the College of Health Sciences, Addis Ababa University (AAU), one of the largest universities in Africa.



African Solution for a Global Problem!



POLICY BRIEF

Discovery Excellence

Dis

Innovation

Centre for Innovative Drug Development and Therapeutic Trials for Africa (CDT-Africa)

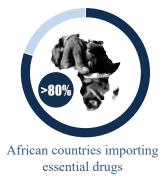


BUILDING ENDOGENOUS EXPERTISE FOR LOCAL PRODUCTION OF MEDICINES: AN URGENT PRIORITY TO ACHIEVE THE SDGS IN AFRICA

EXECUTIVE SUMMARY

Poor access to essential medicines (drugs, vaccines and diagnostics) accounts for the premature death of at least 8 in 10 people in Africa. It is also a major barrier to achieving the Sustainable Development Goals (SDG). We conducted a resource mapping study in 9 Eastern and Southern African countries representing 25% of the population of Africa to understand the extent of unmet need related to access to essential medicines. There were 69 pharmaceutical manufacturing companies in these countries. Almost none of the companies function to full capacity. No vaccine production facilities were identified, and very little attention was paid to diagnostics. No country produced Active Ingredients Pharmaceutical (APIs). Local production was considered essential; however, the extremely low level of expertise was cited as a major obstacle to initiating local production.

Building multidisciplinary endogenous expertise within Africa for the production of APIs and novel medicines is an urgent and critical priority.





Mortality in Africa from lack of essential drugs



Countries lacking therapeutic research & development capacity

INTRODUCTION

Access to medicines (drugs, vaccines and diagnostics) is a formidable development challenge and a major barrier to achieving the Sustainable Development Goals (SDGs) in Africa. On the other hand, ensuring access to medicines not only improves health and wellbeing (SDG 3), but also offers unparalleled opportunity for:

Economic growth and ending poverty (SDG 1, 2, 8 & 9)

Environmentally sustainable development (SDG 13)

Quality education & equity (SDG 4, 5 &10)

Sustainable peace and security (SDG 16) &

Transformative partnerships (SDG 17) (Figure 1).

The Centre for Innovative Drug Development and Therapeutic Trials for Africa (CDT-Africa) was established as an Africa centre of excellence for education and research to address the root causes of poor access to medicines, the lack of expertise and specialist skills. As part of an initial planning work, CDT-Africa evaluated the unmet need for key resources for medicinal products (drugs, diagnostics and vaccines) in 9 Eastern and Southern African countries (Figure 2).

APPROACHES AND RESULTS

We used resource or asset mapping method and employed two approaches to gather data: review of the grey literature and key informant interviews. Key individuals responsible or working in regulatory authorities, Institutional Review Boards, laboratory facilities, institutions engaged in clinical trials, research and development sectors and other relevant institutions within the selected countries were interviewed.

With a population of about 340 million people, studied countries represent a quarter of the population of Africa.

69 companies producing drugs were identified, with about half from Kenya. Only 9 were from Ethiopia despite representing the largest population within the study countries.

None of the manufacturing industries have meaningful research and development programme.

□ None of these industries produce WHO prequalified products.

Almost none of the facilities function to full capacity due to lack of experts.

The diagnostic manufacturing industry is much neglected and no country in the studied countries produces human vaccines.

There was no capacity for producing Active Pharmaceutical Ingredients (APIs).

The average market share for domestically produced medicines in the region was below 15% for pharmaceutical markets and less than 1% for diagnostics and 0% for vaccines.

The main challenges identified for local production were related to very little know-how and capacity for producing APIs and R&D more broadly. Other challenges were underdeveloped infrastructure, high import costs of APIs and low prices of imported finished or locally assembled products. This also applied to diagnostics and vaccines.



Figure 1: Potential contribution of CDT-Africa to achieving the SDGs

IMPLICATIONS AND RECOMMENDATIONS

- □ The growth potential from local production of medicines is enormous and will prove a 'fast-track' to achieving the SDGs.
- □ Developing endogenous capacity for APIs and novel products (for drugs, vaccines and diagnostics) is an urgent priority.
- □ Focus on end-to-end innovation, including training of technicians and specialist experts for APIs, clinical trials and commercialisation, is crucial.
- Establishment and nurturance of institutions that focus on endogenous capacity development should be a policy imperative.