



HEALTH COMMODITIES AND HEALTH TECHNOLOGIES TECHNICAL WORKING GROUP (HCHTWG) UPDATE 31 OCTOBER 2017

The technical working group met on 25th January, 2018 and the following are the main issues discussed:

ADDO list update

It was discussed that updating the ADDO list will assist the private sector to take on the shift from the Amoxicillin oral suspension formulation to dispersible tablets. The public sector has already made this shift under the leadership of RCHS, and it is important that the public and private sectors align. It was therefore agreed that the RCHS program should be the one to raise the need to update the ADDO list through a concept note to TFDA/Pharmacy Council that justifies the need to update the ADDO list to have both oral suspension and dispersible tablets of Amoxicillin in the ADDO list. In the long run, members suggested to consider approaching promoting to local manufacturers the manufacture of Amoxicillin dispersible tablets.

Status of STG/NEMLIT

- The documents have been finalized and officially launched. Printing has started and the MOH is planning initially to print 1000 books. More copies are needed but there is challenge in funding. The aim is to have at least one copy per health facility. Projected to have a total of 15,000 copies.
- In the meantime, the MOH is also planning to have the STG available as an app and on the website of the Ministry of Health.
- PSU is currently looking for a partner to assist in funding for dissemination of the documents to all health staff.
- The review of the tracer medicine list was also dependent on the STG/NEMLIT. Work on this has already started. Similarly a review of the R&R will also be reviewed as well as update the dispensing registers.

MSD stock status and expiry status

It was reported that due to change of some of the ARV medicines, some ARVs will expire in stock. There is concern that some of the medicines for ARVs are having as high as up to 30 Months of Stock. Members were informed that the Logistics Management Units in zones have already distributed the ARVs near to expire that were in MSD zones: Dodoma, Muleba, and Tanga.

However it was agreed that there is need for the different departments in the ministry to communicate on new regimens so as to enable MSD to plan accordingly to accommodate the changes in the supply chain. There is therefore a need to develop an the exit plan of products.