

Strengthening systems to save lives:

Ensuring an uninterrupted supply of quality medicines for people living with HIV/AIDS in Guyana

Seven years ago, there was little chance for survival among people living with HIV/AIDS in Guyana. Today, care and treatment are available to everyone in the country who needs it, extending lives and giving hope.

The phrase “supply chain” has little meaning to 25-year-old HIV-positive Janika. However, when asked how the medicines are helping her, she beams and replies, “They have changed everything. They have changed my attitude toward stigma. I am looking good! I’m much better now.”

Patricia, a health clinic pharmacist in Guyana, provides the life-extending antiretrovirals to Janika and depends on the supply chain to ensure medicines are readily available. She also trusts that they have been stored properly before reaching her pharmacy. Medicines that are spoiled or expired are of no use to her patients.

Patricia and Janika—like thousands of other patients, pharmacists, and clinicians in Guyana—rely on supply chains to deliver a continuous flow of quality medicines and other products necessary to care for and treat people living with HIV/AIDS. Since February 2006, the Supply Chain Management System (SCMS) has been working with the Ministry of Health in Guyana and other in-country partners on a holistic approach to creating stronger and sustainable systems for buying, storing and distributing essential drugs and supplies.

Which products? How many? When?

The ability to accurately project which medicines will be needed in the short- and long-term is essential to providing an uninterrupted supply of health commodities. SCMS supported the Ministry of Health in

April 2006 to conduct the first-ever national quantification (or forecast) of antiretrovirals required for the next year. SCMS trained members of the ministry, pharmacists, and others on how to use a best-in-class quantification software tool. Now there is a much clearer picture of the medicines that should be procured due to a systematic



Guyana and HIV/AIDS

- First case of HIV reported in 1987
- HIV/AIDS is now the leading cause of death among 25- to 49- year-olds
- 1,600 people receive treatment as of January 2007
- All services and commodities for HIV/AIDS care and treatment in Guyana are free
- **There is no waiting list for treatment**



approach which takes into account current inventory levels, safety (or reserve) stock, and projected use.

SCMS has additionally supported the roll-out of a software tool for patient tracking and inventory management. This easy-to-use database provides an accurate assessment of how many people are receiving treatment, the kind and amount of antiretrovirals each patient is taking, and the available inventory. This information will feed into the national-level forecast to provide even more reliable information about the number of patients receiving care and treatment, and which medicines are prescribed to them. Piloted at the country's largest treatment site, the tool will be made available to nine additional sites by March 2007.

Who will buy what? When?

Donor coordination is another key ingredient to ensure an uninterrupted supply of health commodities. SCMS is facilitating joint forecasting and information sharing to coordinate procurement plans among the Global Fund, World Bank, and the US President's Emergency Plan for AIDS Relief (PEPFAR) in Guyana and other countries. This approach helps to ensure that the necessary medicines are ordered when needed, and to avoid surplus or stockouts

How to ensure a reliable supply?

Once items are procured, they are stored in a warehouse close to the health clinics and patients who need them. Until early 2006, the Ministry of Health in Guyana had one central warehouse for health commodities. It was filled to capacity, partly with expired medicines and products that were no longer needed. The Ministry identified the need for a modern, well-organized storage facility, and together with SCMS opened a new annex warehouse in July 2006. The annex warehouse provides a secure and temperature-controlled environment to store antiretrovirals, test kits, and laboratory supplies. Staff members have been trained in warehouse management best practices and have implemented standard operating



A pharmacist in Guyana relies on a steady supply of quality medicines for her patients.

procedures. SCMS and the Ministry of Health are working together to integrate these two facilities into a seamless, reliable warehousing and distribution system for all health sector commodities.

This approach is especially critical to maximize the quality of the pharmaceuticals and supplies maintained in the warehouse. Sandra Manickchand, the annex warehouse manager explains, "If the drugs are not stored properly the products may no longer be effective and even cause harm to patients. If HIV tests are not stored properly they can give inaccurate results."

These improvements applied to the supply chain in Guyana will help to increase the ability of the public health sector to meet the needs for HIV/AIDS treatment and care, while saving the lives of patients like Janika and many others with HIV now and into the future.

Creating a quality supply chain in Guyana for quality health care

Interview with Dr. Leslie Ramsammy, Minister of Health, Guyana

How has HIV/AIDS impacted Guyana?

HIV/AIDS is a serious public health problem for Guyana—and a developmental issue as well. The issue of how countries can access affordable antiretroviral drugs has become central to our trade discussions. It is one of the few public health issues that has impacted our development in the traditional economic sphere of trade.

What are some of the challenges that you have seen that are specific to the supply chain?

Quality health care is impossible without commodities and a high-quality, well-functioning supply chain system. The doctor can diagnose but diagnosis is not always possible or reliable without commodities. We need glucose test strips to make a diagnosis, we need HIV test kits, and we need laboratory reagents for our laboratory tests. After the diagnosis, to either relieve the symptoms or to cure, we need drugs. So by just putting it that simply, we can see how important the supply chain is.

What are some examples of the kind of activities the Ministry of Health is engaged in to ensure a more reliable supply of commodities?

Guyana is not willing to concede anything. We may be a developing country, but for our supply chain we want to develop systems that are no less than what a developed country would have. We have been thrilled to have SCMS with us over the past few years. It is a partnership that has contributed significantly to addressing supply chain challenges. The supply chain is indispensable to the delivery of quality health care. We will not succeed in our response to any public health challenge—from HIV to malaria, tuberculosis to diabetes—unless we have an effective supply chain.

How has SCMS helped you, or how can we help you, achieve your vision?

With SCMS we have a sensitive partner, one who understands our weaknesses and our deficiencies and

helps us build on our strengths. Our storage today is better than at any time in our country's history. More people have been trained in supply chain management. We have made progress in managing our information systems and in managing our finances. SCMS has worked well with us and has contributed to these improvements in a significant way. I hope we can continue these improvements so that when all of us who are presently involved leave the system, we will leave behind a legacy: a system that is working much better. Countries like Guyana must ensure that they are building sustainable systems.

What are your thoughts on sustainability?

Sustainability is the greatest challenge of HIV. We used to have restrictions for HIV treatment, for example, a CD4 (white blood cell count) below 200 before starting treatment. Now, whether we have come to an agreement or not, all of us are providing treatment at a



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*—Dr. Leslie Ramsammy,
Minister of Health, Guyana*

threshold of 350. And the next step is coming, when it doesn't matter what your CD4 is; once you are HIV-positive, you are going on treatment. That will change the dynamic very suddenly. A country could suddenly go from treating 5,000 people to 15,000 people.

It's evident you have a lot of leadership and passion around HIV/AIDS. Why is this issue so close to you?

Health is a development issue and one of the most important economic investments we can make. If we are not investing in health, we are not investing in development, because healthy people are simply more productive. Investing in health is no longer a debatable issue. The time to act is now.

I understand that there is no waiting list for treatment in Guyana.

Every single diagnosed HIV client in our country who has an opportunistic infection or who has a CD4 under 350 is on treatment. The systems that we have in place are not perfect, but we will not paralyze our system waiting for perfection. Guyana is extremely proud of what we have accomplished so far, with the recognition that there is much more to do. We hope that we can become a model for other resource-poor countries in the world—and that we can learn from them, too.

About SCMS

The Supply Chain Management System was established to enable the unprecedented scale-up of HIV/AIDS treatment, care and prevention programs in the developing world. SCMS works to strengthen existing supply chains in the field, procures and distributes essential medicines and health supplies, and facilitates collaboration and the exchange of information among key donors and other service providers. SCMS is funded by the US President's Emergency Plan for AIDS Relief through the US Agency for International Development.