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Supply chain management of health commodities for reducing global disease burden

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Abstract

Purpose: Reducing global disease burden requires improving access to medicines, thus the need for efficient and effective supply chain management for medicines. The Nigerian government came up with new policies on Mega Drug Distribution Centres and National Drug Distribution Guidelines to improve access to quality medicines with pharmacists having a key role to play. However, pharmacists in Nigeria seem not to be aware and adequately equipped to handle the medicines supply chain. This article aimed at assessing the awareness and readiness of Nigerian pharmacists on supply chain management practices for improving access to medicines.

Methods: Pharmacists in Nigeria's Capital were randomly sampled. Semi-structured questionnaires were administered. Descriptive statistics was used in data analysis. *P* values less than 0.05 were considered to be significant.

Results: 29.3%, 20.7% and 53.7% were not aware of supply chain management, National Drug Distribution Guidelines and Mega Drug Distribution Centres, respectively. 85.46% do not have a copy of the National Drug Distribution Guidelines. 78% were not aware that Mega Drug Distribution Centres are already operational. 35.4% have never been involved in any supply chain management practice. 69.5% often experience stock out of vital and essential medicines, of which 85.2% were in hospitals. 15.9% were successful in managing their facility's supply chains. 84.1% opined that pharmacists in Nigeria are not yet ready to handle the medicines supply chain.

Conclusions: Findings showed limited awareness and readiness on supply chain management of medicines. This may be due to inadequate supply chain management skills and infrastructure, poor financing, lack of accountability and poor management. Tackling these as well as pharmacists showing more interest in the country's health policies and obtaining necessary postgraduate certifications will lead to improvements.

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This will improve access to quality medicines and thus help in the fight to reduce disease burden both locally and globally.

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Introduction

Ensuring equity and equality in access to medicines is important in any healthcare system. To achieve this, there needs to be a system that ensures medicines of good quality are always in constant supply in the right quantity at the right time and to the right consumers in a cost-effective manner. This system, referred to as a supply chain, has to be managed effectively to achieve desired results. In supply chain management, coordinated activities and decisions which incorporates all stakeholders are undertaken to ensure that a product or service is right for the end user, distributed in the right quantity, to the right location at the right time.¹ This system should be cost-effective and should ultimately satisfy the end user. Serving customers is at the pinnacle of the supply chain as each of the processes is meant to meet customers' needs. The right products are selected and quantified based on program needs. The products are procured, kept in inventory, stored and distributed. The entire process is frequently monitored and evaluated.²

The medicine supply chain of developing countries like Nigeria seems to be inadequate. Poor access to medicines contributes to several avoidable deaths and disabilities as the supply system for medicines is negatively affected by inadequate funding, poor management and inadequate qualified healthcare workers.

The medicine supply chain in Nigeria has been described as chaotic and uncoordinated. Drugs are sold in open markets, on the streets and even inside commercial passenger carriers. A significant proportion of these medicines have been adjudged to be adulterated, fake and substandard. About 17% of essential generic medicines and 30% of antimalarials are counterfeited.³ Drug distribution is handled by too many stakeholders. Major manufacturers use private logistics companies, international development partners use the services of courier companies while private sector manufacturers and importers have their separate

distribution channels.⁴ These lead to discrepancies in medicine supply and access, medicine expiration before reaching the end users and counterfeit medicines being sold in unregistered and unlicensed premises by non-professionals. Medicines are handled poorly as they are displayed in conditions that encourage faster degradation of active ingredients. Patent medicine vendors, who are authorized to dispense only Over-the-Counter medications, now diagnose, prescribe, dispense and treat all manner of disease conditions. These vendors do not have the adequate training and knowledge to handle ethical preparations. Only licensed pharmacists, registered with the Pharmacists Council of Nigeria (PCN) are required, by law, to provide such services.⁵

In a bid to salvage this debilitating situation, the Nigerian Government came up with a policy to shut down all open drug markets in Nigeria and replace them with Mega Drug Distribution Centers (MDDC) to improve drug distribution and access and to ensure circulation of good quality medicines. Also, a new National Drug Distribution Guideline was introduced with regulatory bodies like PCN and the National Agency for Food and Drug Administration and Control (NAFDAC) serving as enforcers.⁶ This new policy restricts drug distribution to pharmacists. However, are pharmacists in Nigeria aware of this new policy and are they adequately equipped with the necessary supply chain management skills required to achieve the objectives of this new strategy? The medicines supply chain has five main actors which include healthcare producers, healthcare product intermediaries, healthcare providers, healthcare fiscal intermediaries and purchasers.⁷ Pharmacists have significant roles to play within these five categories if improvements are to be seen in access to medicines in Nigeria. This study aimed at assessing the awareness and readiness of pharmacists to play the key role required of them in achieving the goals and harnessing the advantages of a coordinated medicines supply system in Nigeria.

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