

Rapid, affordable, and robust

New initiatives from *Africa Health's* **Publishing Partners**

Originating all the way from South Korea, **Standard Diagnostics, Inc** (SD) has been engaged in the research, development, and commercialisation of in-vitro diagnostic products since 1999. Its flagship products, ICA rapid test kits, are available through 160 distributors in 100 countries for the point-of-care testing (POCT) of infectious diseases, tumour and cardiac markers, hormones, and forensics.

All the SD products are manufactured in-house under strict quality controls to meet the international standards (ISO 13485:2003, etc.). Recently, SD also developed self-monitoring blood glucose (SMBG) system, SD CHECK GOLD, SD CodeFree and is also developing protein chips product lines.

Meanwhile, an important sales territory for SD is Africa. Over 30% of overall sales revenues of SD is derived from the continent. The focus is on Rapid tests (ICA) with especial focus towards Malaria Ag P.f, Syphilis, and HIV. The features of rapid tests is that they are easy to use and cost efficient for mass screening work.

SD spends as much on product development as on sales and marketing. Recently, clinical studies for SD BIOLINE HIV Ag/Ab combo were conducted in South Africa, Zimbabwe, and Togo with good clinical results. It is hoped that this innovative HIV product will come to market in the near future. **Standard Diagnostics** has developed a robust sales network around Africa, and is pleased with the positive feedback it has been receiving from its clients.

On the 30th of September, 2010, the **Affordable Medicines Facility-malaria**(AMFm) the working document of the WHO backed initiative to combat malaria, was signed in Nigeria.

The rapid spread of antimalarial drug resistance over the last few decades called for more intensive monitoring of drug resistance, in order to ensure proper management of clinical cases and quick detection of changing pattern of resistance – this ensures an effective national malaria treatment policy. This new initiative, provides for low-cost proven-quality ACTs to enormously increase the effectiveness of antimalaria programmes. WHO has also called for continuous monitoring of the efficacy of the approved ACTs, and countries included in the AMFm programme are being supported to strengthen their drug-resistance surveillance systems.

Also to ensure the preservation of the efficacy of Artemisinin as an essential component of ACTs, WHO has called for the ban on use of oral Artemisinin monotherapies and this has been adopted by the Nigerian health

authorities. The financial support for this programme is from UNITAID, the UK's Department for international Development (DFID), and other donors.

The thrust of the plan is to achieve an uptake in quality medicine consumption through a sharp reduction in manufacturers' sales price of ACTs to public, private and non-profit (not-for-profit) organisations/ buyers. To be able to achieve this, the Fund negotiated a lower price for ACTs and is paying a large proportion of this directly to manufacturers on behalf of the buyers. Prices should now be not more than N70 per dose (average of US\$0.5). This will greatly help reduce the high mortality rate due to malaria in Nigeria, which is put at between 250 000 and 300 000 annually by WHO. Previously, ACTs sold for between US\$1.75 and US\$2, leading to a greater use of cheaper medicines such as chloroquine and sulfadoxine/ pyrimethamine (SP) combinations, which currently sell at average retail price of not more than US\$0.5 per dose.

Other participating countries in the first phase of the AMFm initiative are Ghana, Kenya, Madagascar, Benin, Cambodia, Niger, Tanzania, Uganda, Rwanda, and Senegal. The six manufacturers that have signed a supplier agreement with the Global Fund under the programme are: Ajanta Pharma, Cipla, Gulin, IPCA, Novartis, and **Sanofi-aventis**, having met quality criteria for supply of ACTs through achievement of WHO pre-qualified status.

The initial programme is for 2 years, and follow-on programmes are expected to also include local manufacturers into the process.

Alere has officially launched its Alere™ CD4 Test which comprises the Alere Pima™ analyser and an Alere™ CD4 cartridge, and enables point of care CD4 T-helper cell analysis of HIV/AIDS patients from a fingerprick or venous blood sample in only 20 minutes. Fully portable, the analyser can be transported directly to the patient, allowing healthcare professionals to conduct CD4 testing in rural communities and resource-limited settings as well as at the physician's office.

The analyser helps overcome the challenges experienced by health practitioners who depend upon large central laboratories to process patient blood samples, such as transportation of samples and delays to patient follow-up and treatment. Small and robust, the Alere Pima™ CD4 analyser comes with a specially designed carry case, padded to protect the analyser from the elements, which can be equipped with everything healthcare workers need to take analysis straight to the patient.