



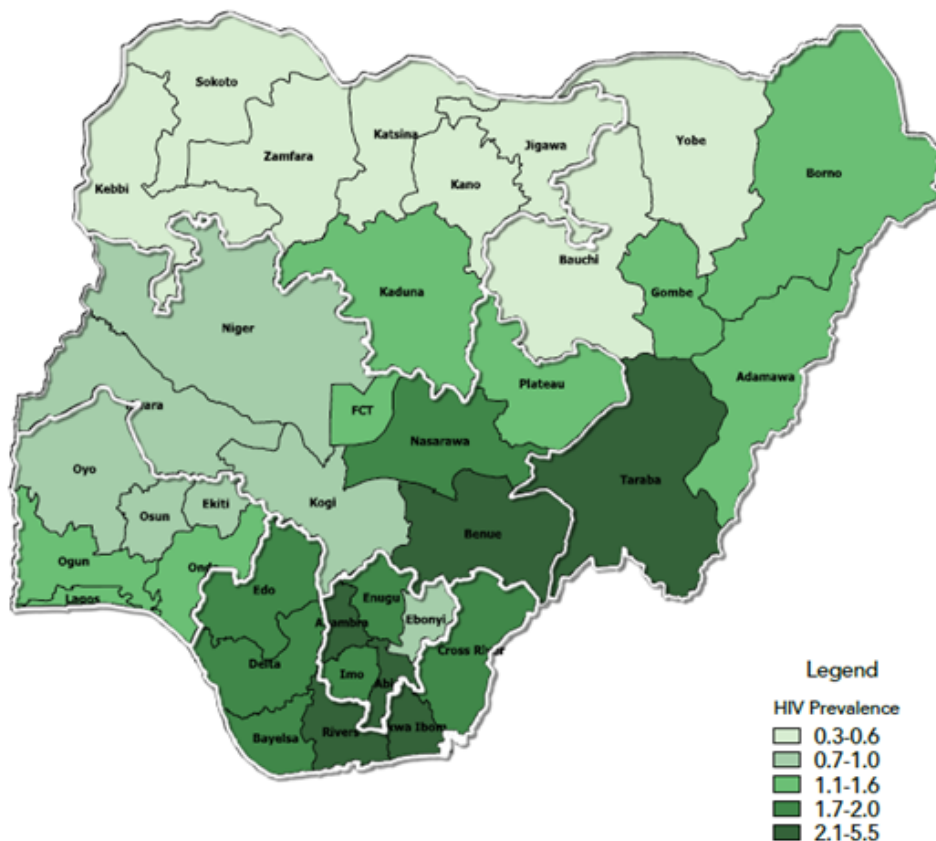
Utilizing community pharmacies for ART refills in Nigeria

Consultation on differentiated ART delivery in WCA
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Institute of Human Virology, Nigeria
17 May 2019 – Accra, Ghana



HIV in Nigeria

Regional distribution



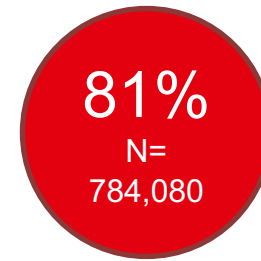
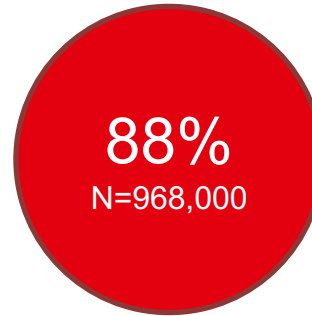
Zones	HIV Prevalence	95% CI*
North Central	2.1	1.8-2.4
North East	1.1	0.9-1.3
North West	0.6	0.4-0.7
South East	1.9	1.7-2.2
South South	3.1	2.8-3.4
South West	1.2	1.0-1.4

* The 95% CI (confidence interval) indicates the interval within which the true population parameter is expected to fall 95% of the time.



HIV in Nigeria: 90-90-90 Targets

2014 – 3.2 million people living with HIV [1]



2019 – 1.9 million people living with HIV [2]

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[1] Nigeria HIV/AIDS Indicator and Impact Survey. National Summary Sheet

[2] Nigeria's Race to the 2020 Goal of 90-90-90; An ambitious target to end AIDS

<https://nigeriahealthwatch.com/nigerias-race-to-the-2020-goal-of-90-90-90-an-ambitious-target-to-end-aids/#.XMruXth7nIU>



HIV in Nigeria: Challenges

- Poor treatment access (1million people waiting for ART), poor linkage and poor retention
- Weak health system
 - few hospitals, untrained healthcare workers, leading to over-crowded public hospitals
- HIV services are majorly provided at:
 - Public hospitals (tertiary and secondary) – Comprehensive ART services
 - Private clinics – managed by NGOs
 - Primary Health Centers (PHC) – PMTCT services
- Over-reliance on donor funding (US PEPFAR)



Intervention: Community Pharm ART

The problem: Overcrowded health facilities with few staff

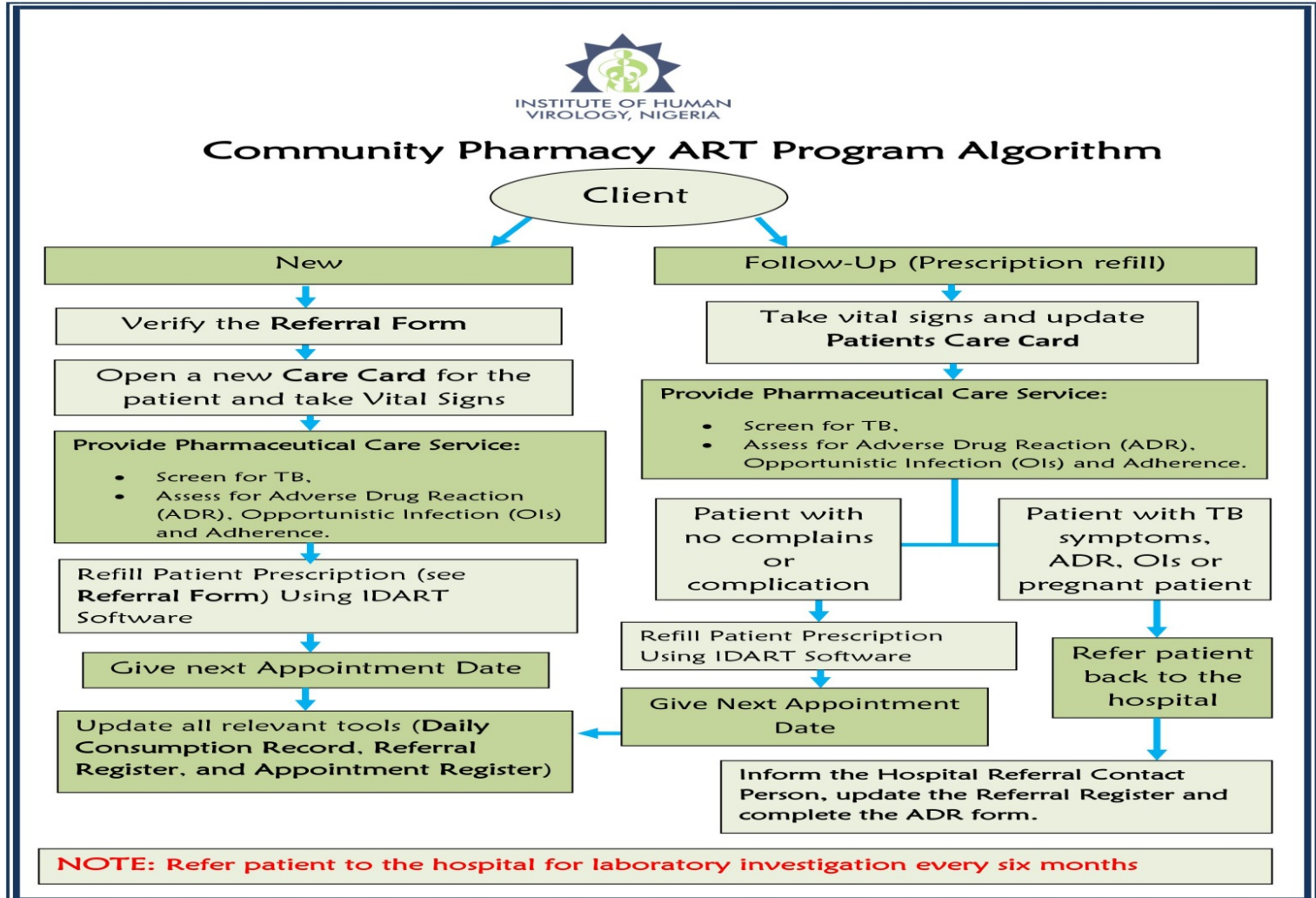


The solution: Treat in the Community





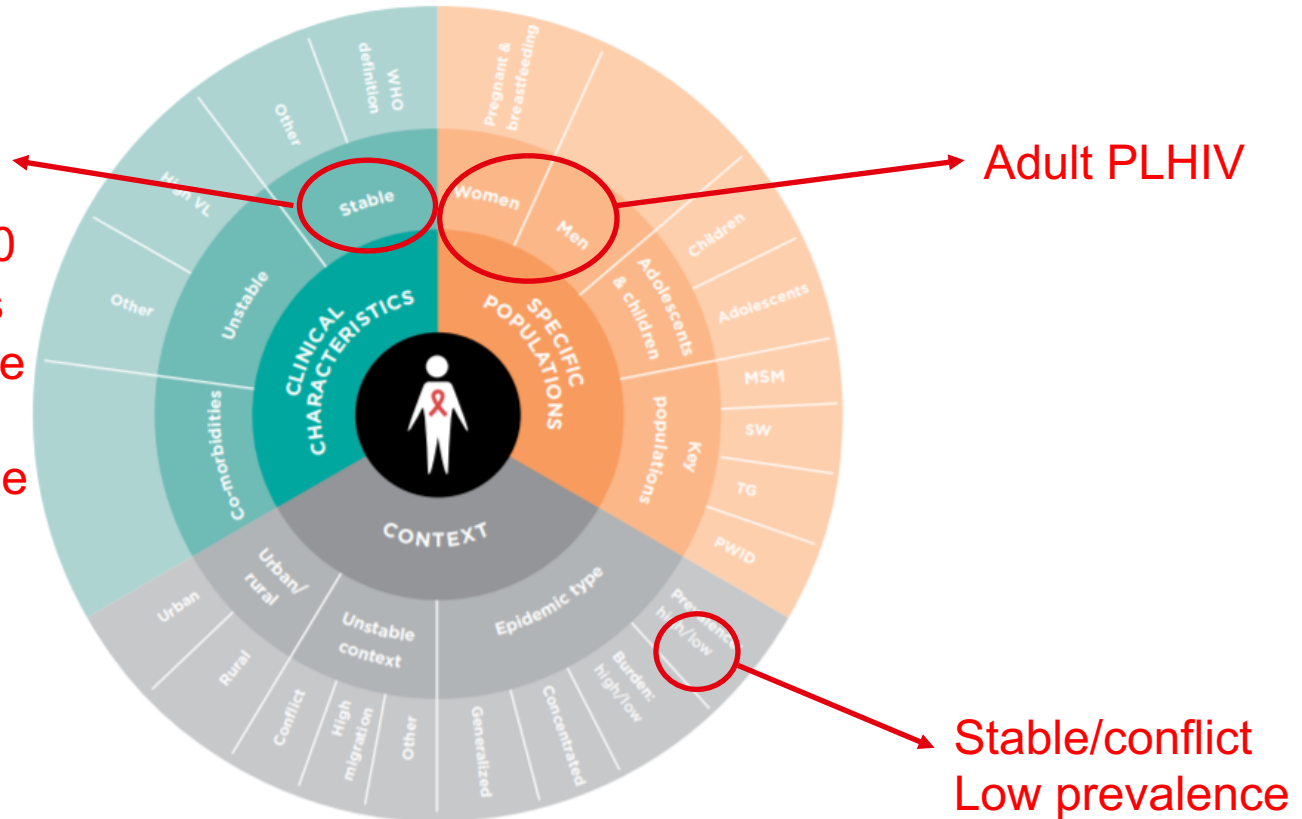
Algorithm





Who is intervention aimed at?

First-line regimen
Clinically stable
Client with viral suppression (<1000 copies/ml) or clients with good adherence profile (≥ 95%) and manageable adverse drug reactions)





Building blocks of Intervention

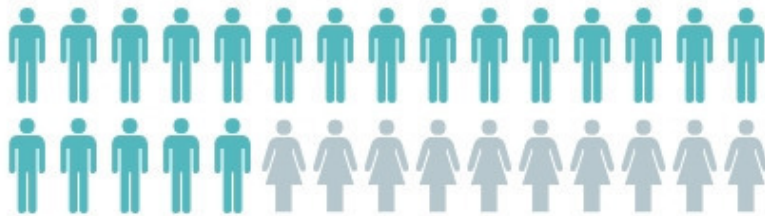
	ART refills	Clinical consultation	Psychosocial support
WHEN	3 months	6 months	3 months
WHERE	Registered community pharmacies	Health facility	Community pharmacies
WHO	Pharmacist	Clinician	Community pharmacist
WHAT	ART refill	Patients are reviewed for improvement in clinical outcomes	Counselling to address stigma and other barriers to adherence



Outcomes

5483

PLHIV DEVOLVED TO
COMMUNITY PHARMACIES



68

COMMUNITY
PHARMACIES
RECRUITED

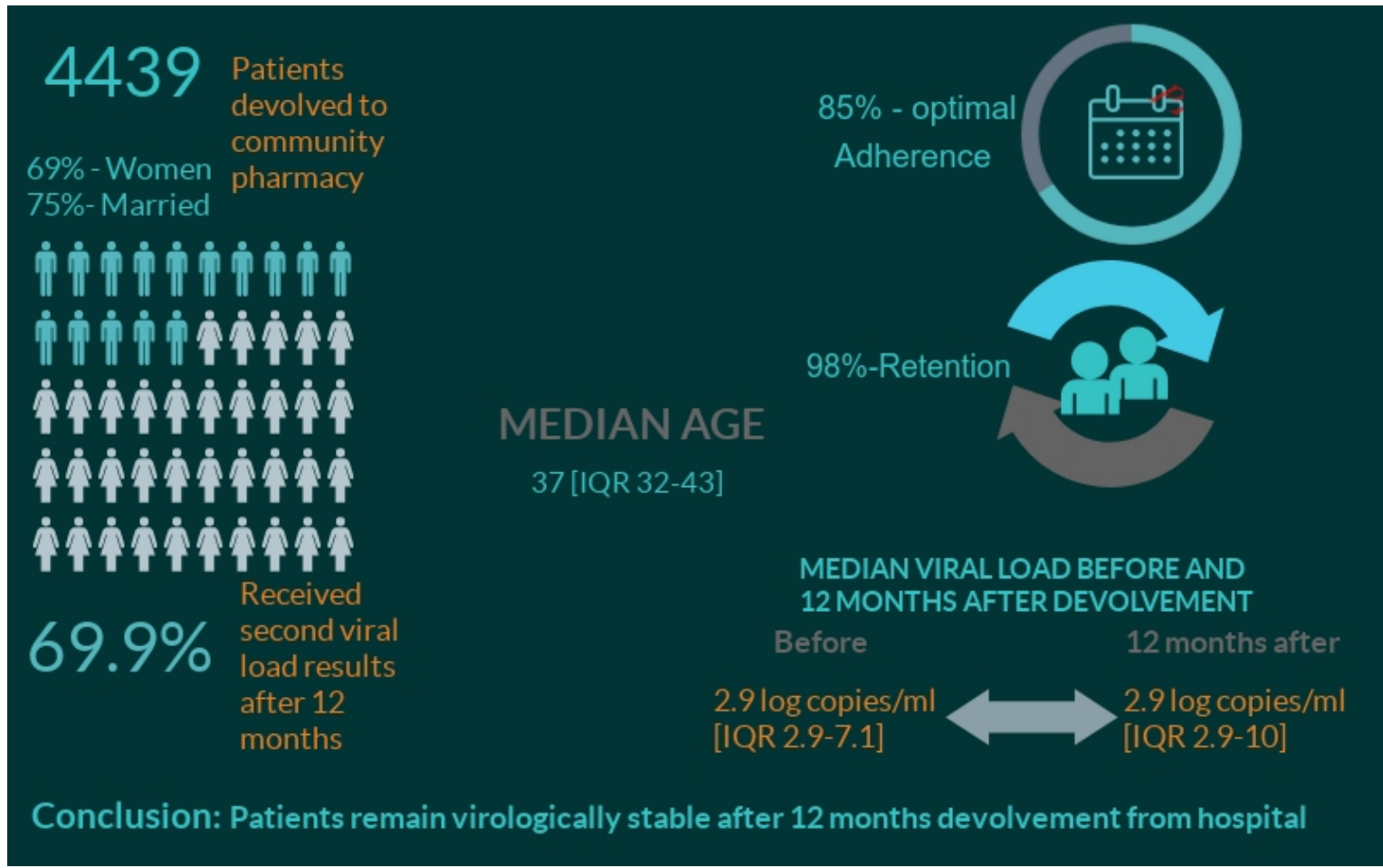


35

PUBLIC
HOSPITALS
RECRUITED



Outcomes





Impact

"I prefer here (community pharmacy) because I know many people in that hospital. If they know that you have HIV, they will insult you because of the sickness. The way our aunty (the pharmacist) handles us is good. She puts her mind to ask you questions. She is not angry."

- Client

"I can come in the evening and at any time. She (the pharmacist) normally does not waste my time... In the hospital, we stay till at times two o'clock, at times three o'clock."

- Client

"It forms a family quorum between you and the patient. When they come they open up easily to you and they have to talk unlike in the crowded hospitals, So the availability of time, good pharmaceutical care is sure. Most of the patients that came testify to this, that the program is an excellent one and they love it and their haven't been any complaints from them."

- Healthcare worker



Scale up/Sustainability

- Implementation was funded by an NGO (IHVN)
- Adopted and implemented by the Nigerian Ministry of Health
- 35 health facilities in four states covered
- Plan to recruit more facilities from across the country
- Integrated into the National Health Insurance Scheme.
- Cost - \$201,756/year for 68 pharmacies
 - \$2,967/pharmacy/year
 - Excluding medications, laptops and modems



Lessons learned

- Community-based ART refills led to good outcomes for patients
 - Patients preferred the intervention over the hospital based approach
- Supply chain was not broken; this ensured constant availability of medications
- Funding is required for sustainability
- Intervention can become a comprehensive model of care if integrated in the National Health Insurance Scheme



Thank you



INSTITUTE OF HUMAN
VIROLOGY, NIGERIA



Federal Ministry of Health

