

MEDIA RELEASE

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MEDICINE STOCKOUTS: A NEW DISASTER LOOMS

Stocks of 2nd and 3rd line antiretroviral drugs (ARVs) and contraceptives have run out across the country – a crisis that has been developing over the past two months. The Stop Stockouts Project (SSP) has been in communication with the National Department of Health (NDoH), which is aware of the medicine stockouts. However, no clear plan has been provided on how to address these shortages, beyond identifying and reporting them. “International API (active ingredient) shortages are also to blame and lives are at stake,” says acting manager, SSP and CEO, Southern African HIV Clinicians Society (SAHCS), Lauren Jankelowitz.

Following the shortages earlier this year in mainly the North West Province when industrial action led to stockouts of essential medicines, the latest stockouts represent a national crisis. According to SSP information, Mpumalanga is the worst hit, followed by the North West, Gauteng, Limpopo, Eastern Cape, Free State, and KwaZulu-Natal. No reports have been received from the Northern Cape yet.

“Responsibility for this monumental crisis lies at the door of the affected provincial and national departments of health. The SSP hotline for any party to report stockouts nationally has been inundated with calls and requests for assistance,” says Jankelowitz.

A robust supply chain and uninterrupted access to medication is crucial in ending HIV. Stockouts of ARVs interrupt treatment, increasing the risk of opportunistic infections, treatment failure, ARV drug resistance and ultimately death, explains Jankelowitz. In addition, stockouts place a further burden on patients who must often travel long distances to reach a health facility. Having to repeatedly return to a clinic and spend extra money on transport and childminding services can lead to indebtedness and a constrained ability to put food on the table and purchase other essentials.

Both the SSP and the Southern African HIV Clinicians Society (SAHCS) point to ongoing efforts to arrest this crisis. This includes routine monitoring reports, telephonic surveys of facilities to monitor stockouts, and a hotline where patients and facilities can report stockouts. This information is escalated to NDoH. Furthermore, the SAHCS has developed clinical guidelines on alternative medicines that patients can use while supplies are being resolved.

“Communication from NDoH has been limited and without a clear action plan to immediately resolve this crisis. We are at a loss as to how to proceed, and frankly a little stunned at how poorly these

stockouts and any clinical guidance have been communicated to healthcare workers on the ground. It's a ticking time bomb," says Jankelowitz.

There has been no response to a request by SSP in April this year, during the North West strike, urging the NDoH to investigate why supplies were not being delivered; where the bottlenecks were and why there was a backlog in the first place – although it was officially blamed on industrial action over unrelated employment issues by staff at distribution points in the province.

"If there is indeed no budget as indicated by the NDoH, we need to get to the bottom of why this is the case and what will be done about it," Jankelowitz says. "We call on all parties – government, suppliers and healthcare workers – to work together to resolve this disaster and are considering asking countries with surplus supply to help fill the gap temporarily, while we wait for South Africa's suppliers to step up production.

The SSP urges anyone who has been affected by medicine shortages or stockouts to call the hotline on 084 855 7867 or email report@stockouts.org. Reports can be made anonymously.

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The Stop Stockouts Project (SSP) is a consortium monitoring and reporting on shortages and stockouts of essential medicines, childhood vaccines and chronic medicines in South Africa. The consortium consists of Doctors Without Borders/Médecins Sans Frontières (MSF), Rural Doctors Association of South Africa (Rudasa), Rural Health Advocacy Project (RHAP), SECTION27, Southern African HIV Clinicians Society, and the Treatment Action Campaign (TAC).

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The views reflected in this press statement do not necessarily reflect the views of the European Commission.



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