

Getting Products to People: The case of misoprostol

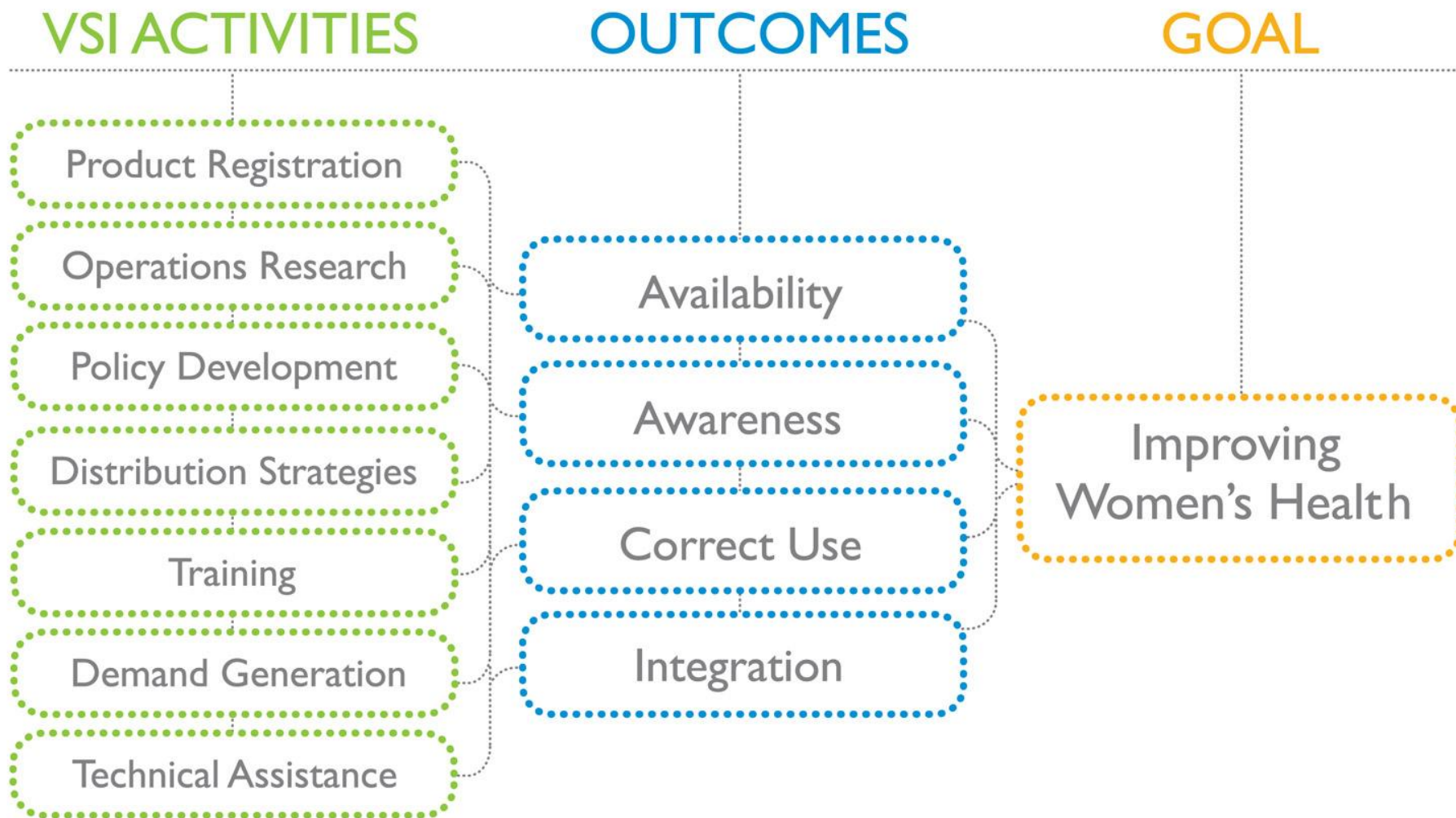
Melodie Holden

President/CEO

VSI



VSI's approach



The case of misoprostol

Misoprostol is capable of curbing maternal mortality due to postpartum hemorrhage & unsafe abortion



- Effective, evidence-based intervention
- Heat-stable, low-cost, generic tablets
- Simple to administer without skilled attendance

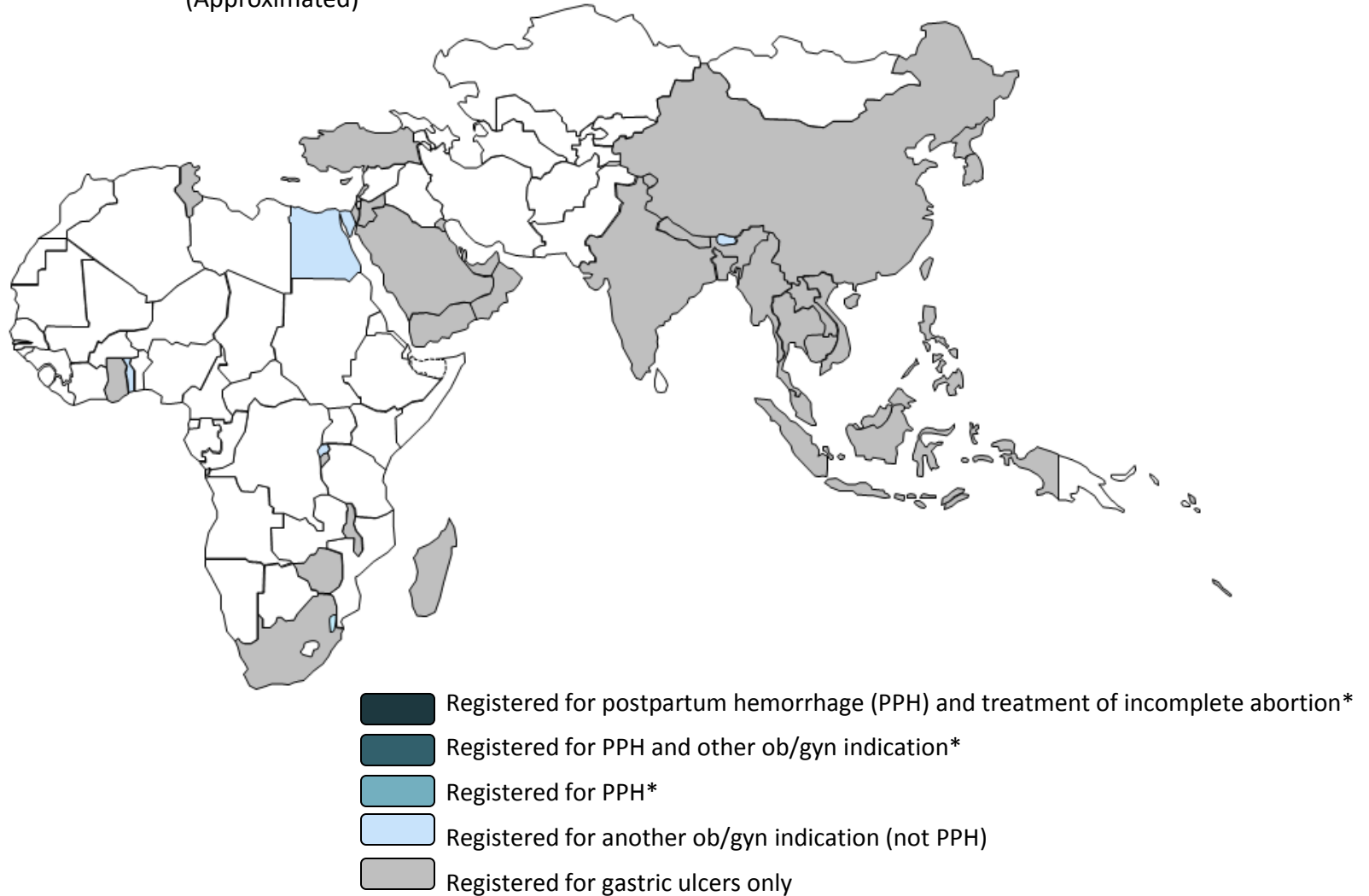


Ideal in low-resource settings & supported by international health organizations

2004

misoprostol registration status

(Approximated)

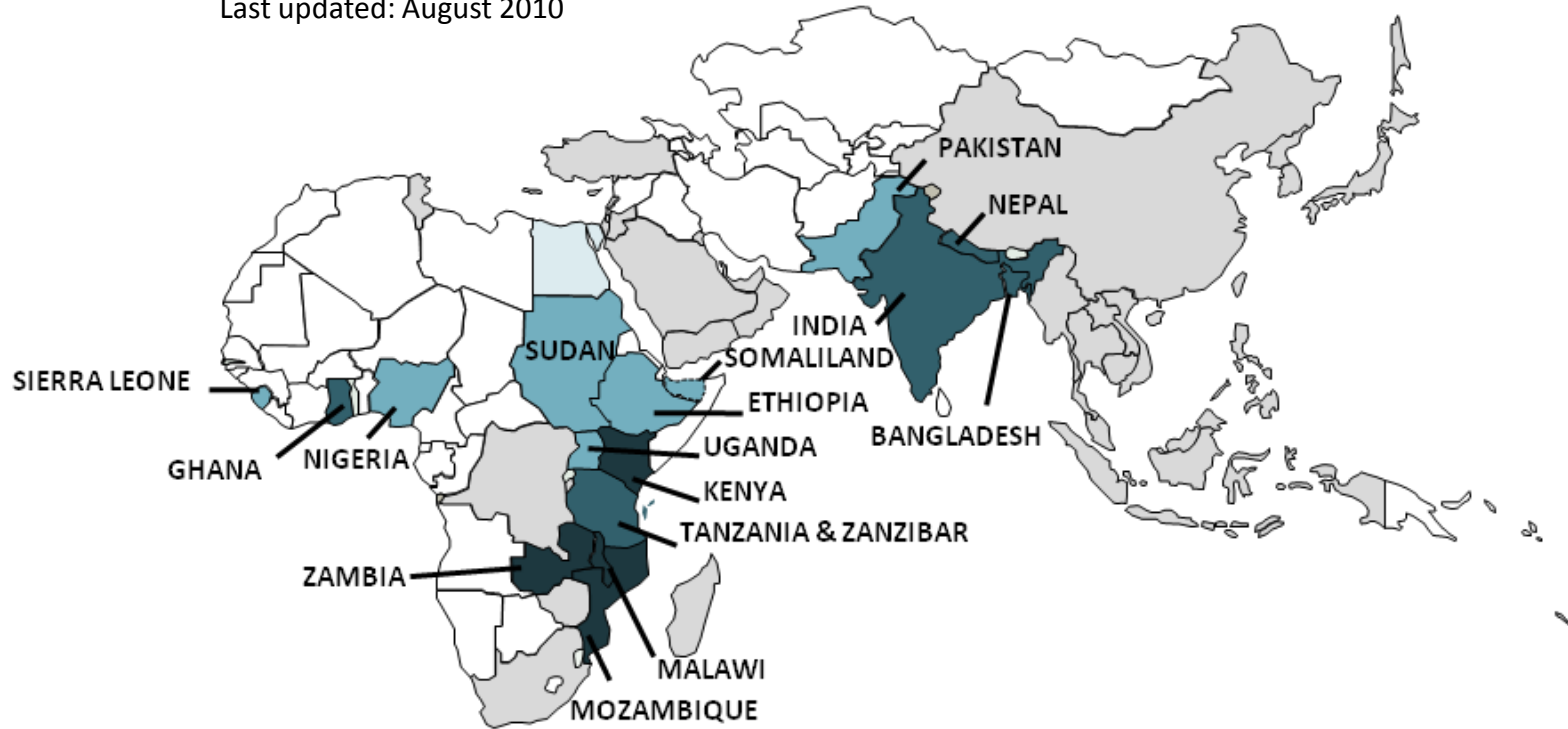


*Misoprostol may or may not be registered for gastric ulcers

2010

misoprostol registration status

Last updated: August 2010



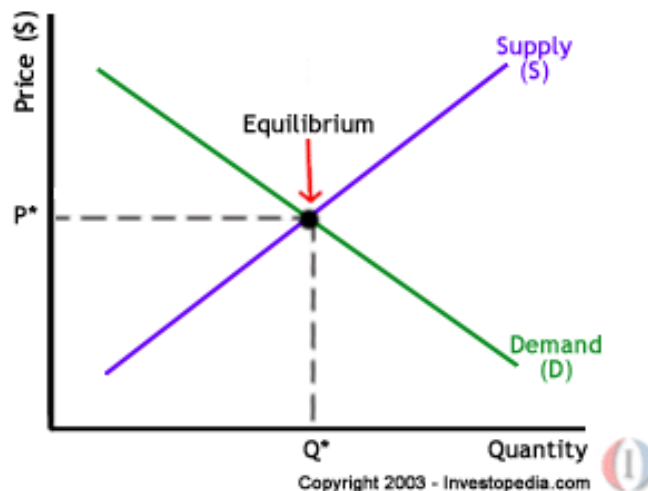
- Registered for postpartum hemorrhage (PPH) & treatment of incomplete abortion*
- Registered for PPH and other ob/gyn indication*
- Registered for PPH*
- Registered for another ob/gyn indication, not PPH*
- Registered for gastric ulcers only

*Misoprostol may or may not be registered for gastric ulcers

Getting products to people requires a convergence of supply and demand

Supply

- Registration, Quality
- Distribution Strategies, Public & Private, Policies
- Forecasting, Procurement, Logistics



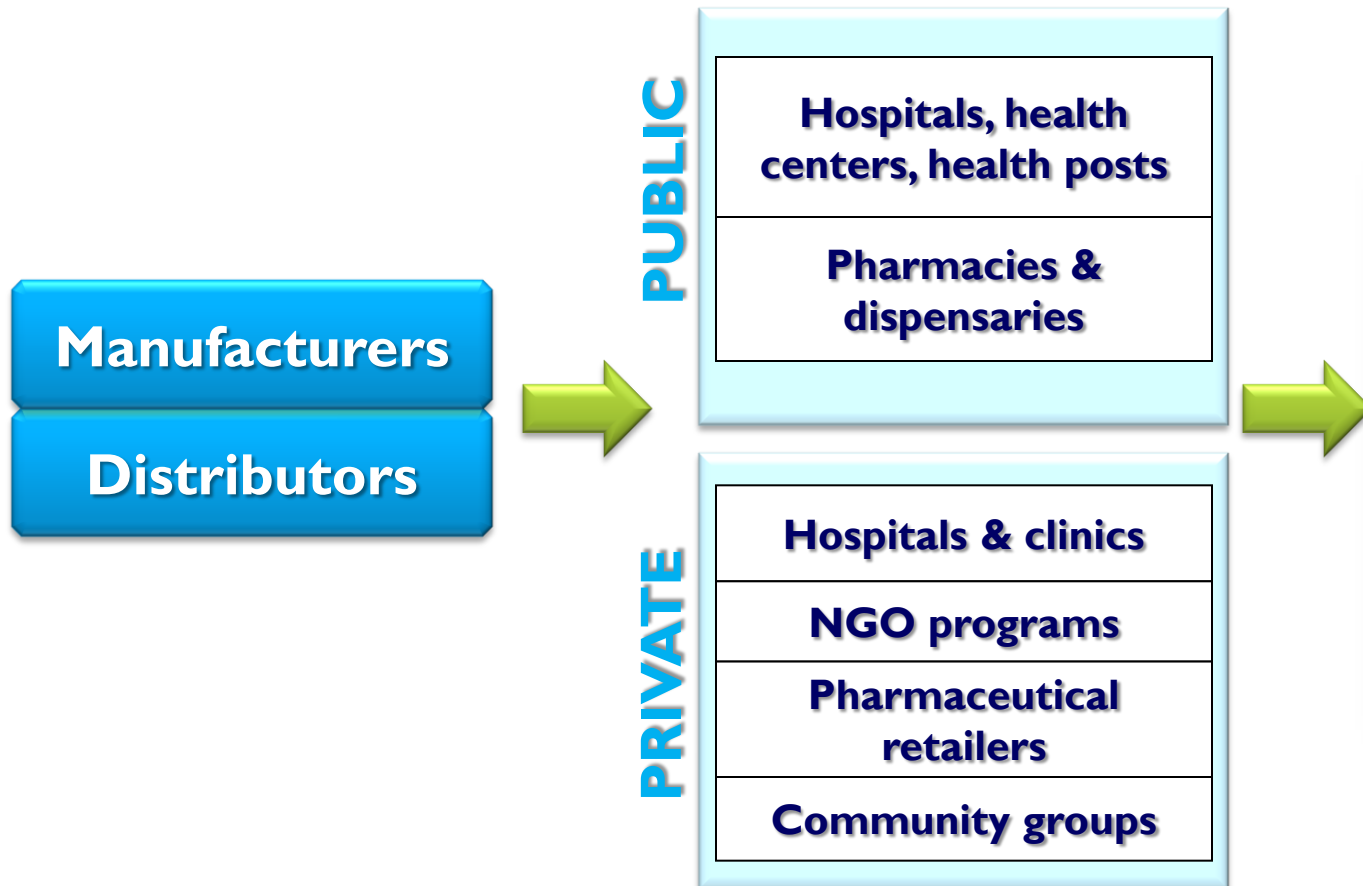
Demand

- Acceptability
- Community
- Training
- Jump-start sales



- Is the price right?
- Is distribution adequate for impact?

Evaluate and select the optimal distribution channels to maximize impact



Government policies set level of access guidelines and public sector procurement

Misoprostol for PPH

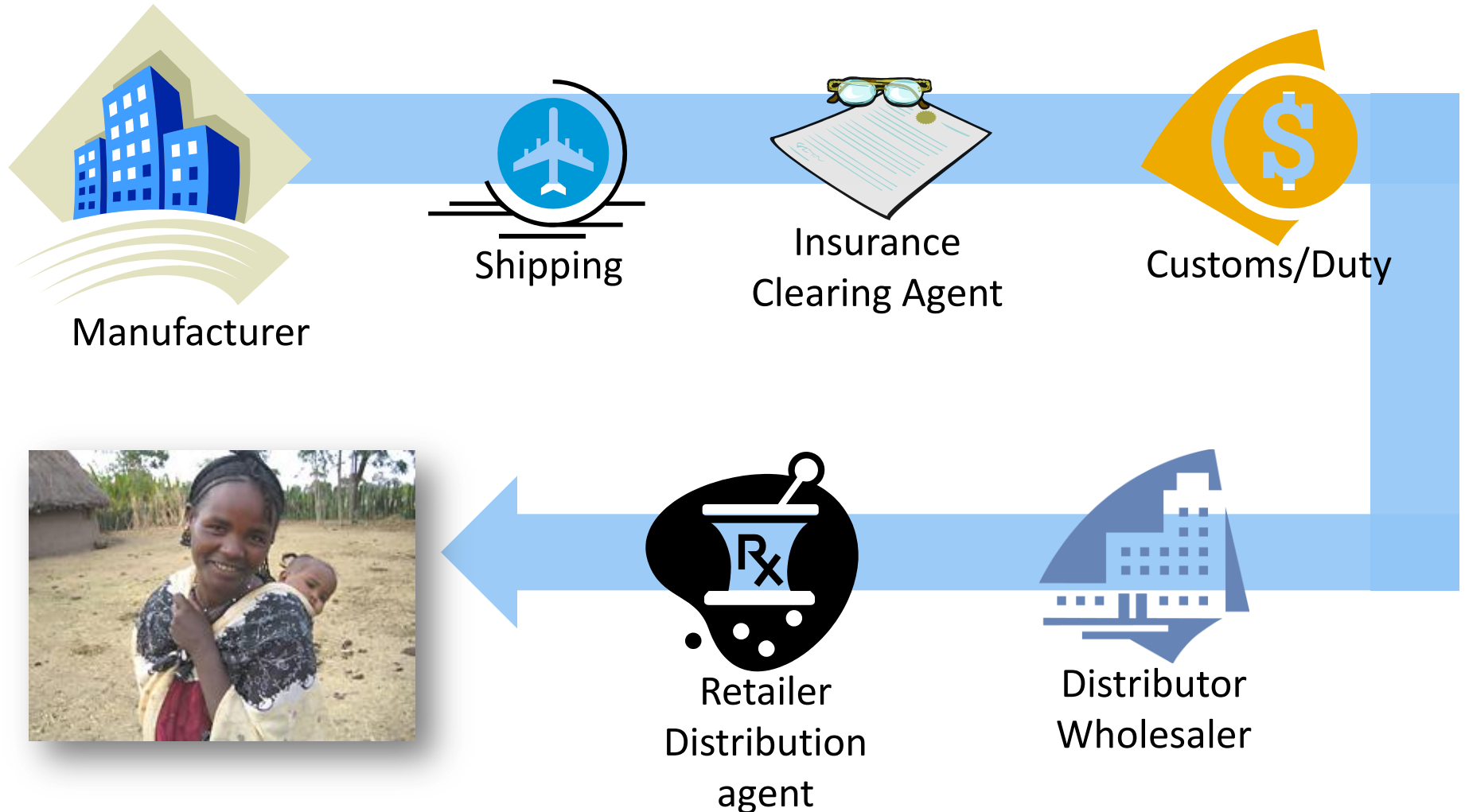
Essential Drugs List

Ethiopia
Tanzania
Zambia
Sudan (South)
Kenya

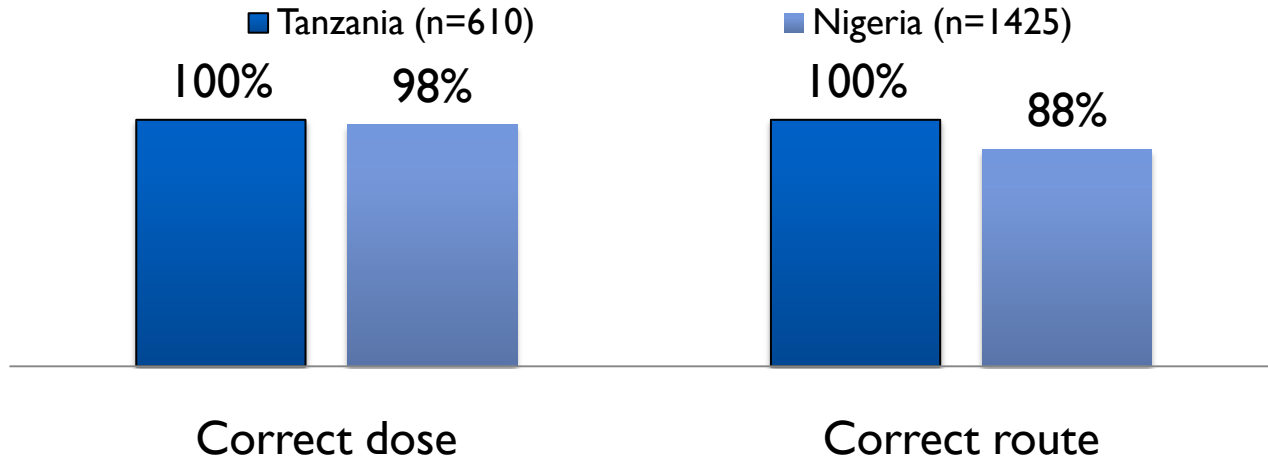
National Clinical Guidelines

Ethiopia
Nigeria
Tanzania & Zanzibar
Uganda
Zambia
Ghana
Kenya

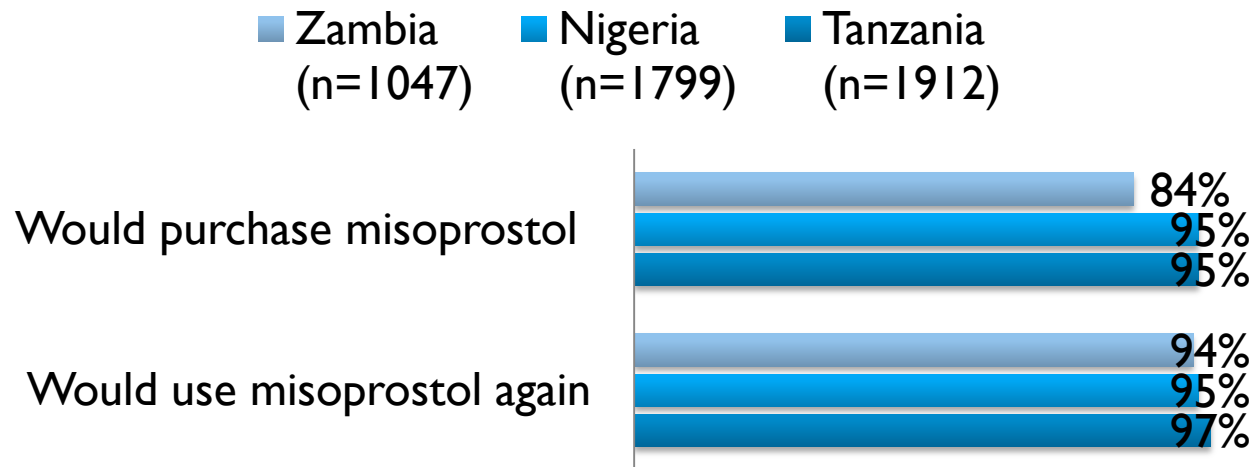
VSI identifies and reduces the elements of cost to the end user



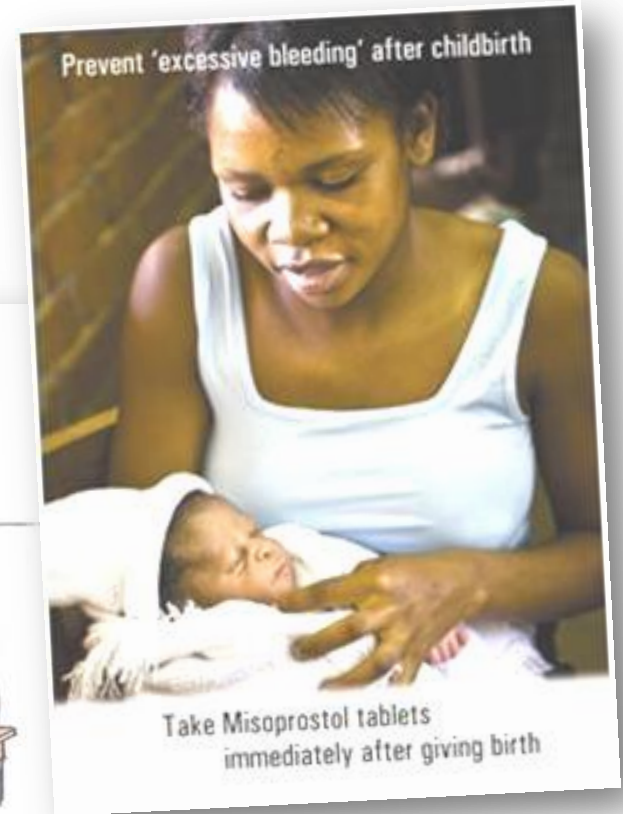
Misoprostol is easy to understand



Misoprostol is highly acceptable



Community mobilization involves the delivery of clear messages through local groups



Challenges and solutions for large-scale implementation

Political sensitivity

- Local advocates and agencies
- Policy meetings
- Staged rollout

Institutionalization

- Clinical guidelines
- Essential Drug List
- Training curricula
- Policy meetings
- Scientific evidence
- Operations research

Lack of trained providers

- Task shifting/sharing
- Cost effectiveness
- Simple technologies

Rural environments

- Local implementers
- Public and private sectors
- Social marketing
- Demand generation/IEC

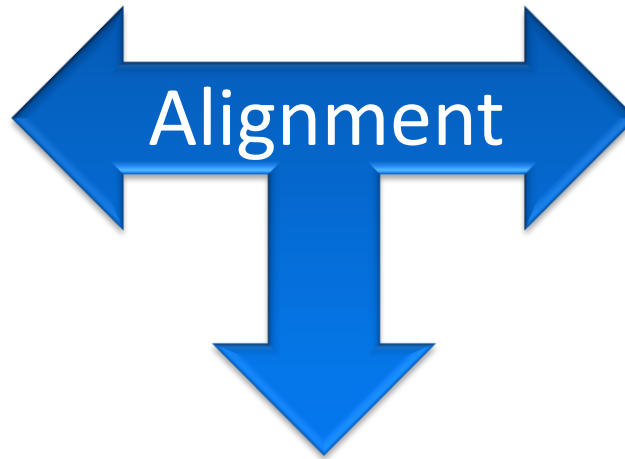
High prices

- Generics
- Price competition
- Negotiation
- Subsidization
- Startup investment
- Bulk purchases

Creating access to misoprostol: What needs to be done now?

Supply

- Registration, Quality
- Distribution Strategies, Public & Private, Policies
- Forecasting, Procurement, Logistics



Demand

- Acceptability
- Community
- Training
- Jump-starting sales



- Is the price right?
- Are sales adequate for impact?

“Thank you to those who have provided us with this drug. You have given us pride.”

- Antenatal care provider, Masaiti, Zambia

“I had nightmares while I was pregnant because I feared bleeding. I am grateful for misoprostol for protecting me.”

- Mother with previous PPH, Hayin Ojo, Nigeria



“As men, we are the gravediggers in our communities. Since this project came, we have not dug any graves for our women.”

- Safe Motherhood Action Group member, Kapiri Mposhi, Zambia

Stay informed! Get involved!

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- **GIVE** through VSI

www.vsinnovations.org

Melodie Holden
President/CEO
mholden@vsinnovations.org

