Management of Essential Maternal Health Medicines: Examples from Rwanda and Kenya

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Maternal Health

• Leading causes of death in both countries
  • Postpartum hemorrhage (PPH) and pre-eclampsia and eclampsia (PE/E)

• Interventions are known
  • Administration of uterotonic – oxytocin or misoprostol
  • Prevention and treatment of PE/E with magnesium sulfate
Management of MH Commodities

- Medicines and supplies are key elements of these interventions
- Availability is only a part
- Correct management to assure quality
  - Selection of medicines to use
  - Storage conditions
  - Inventory management
Pharmaceutical Management Cycle

Selection

Management Support

Procurement

Distribution

Use

Policy, Law, & Regulation

Examples of Findings to be Presented (surveys conducted in 2012)

- Kenya: 49 facilities
  - 6 dispensaries
  - 27 health centers
  - 16 hospitals
- Rwanda: 61 facilities
  - 40 health centers
  - 10 district hospitals
  - 10 district pharmacies
  - MPDD (central medical stores)
Selection (1)

- Oxytocin, MgSO$_4$, and misoprostol are on current EML in both countries.

- Oxytocin and MgSO$_4$ are in current STGs in both countries; misoprostol also included in STGs for specific situations.
Selection (2)

- EML and STGs not harmonized
  - Levels of facilities where specific medicines should be used do not match

- Misoprostol is not on the most current EML for PPH

- EML not generally available in facilities
Storage of MH Medicines

• Oxytocin that can be stored at up to 30 °C procured in Rwanda and in Kenya (for use in HCs only)

• Most storekeepers aware of correct storage conditions for misoprostol and MgSO$_4$
Storage Problems

• Confusion about storage of oxytocin in both Kenya & Rwanda

• Poor knowledge of storage requirements for ergometrine; stored out of the fridge in Rwanda (40% DPs, 40% hospitals, 25% HCs)

• Lack of temperature monitoring of fridges at all levels of facilities in both countries

• Supplies for cold chain problematic in both countries
Availability of MH Medicines

Kenya

Rwanda

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<th>Medicine</th>
<th>Dispensary</th>
<th>HC</th>
<th>Hospital</th>
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Recommendations

In-country

• Align key national documents
• Develop job aids and standard procedures; orient staff on correct storage practices
• Strengthen inventory management through capacity building, SOPs, and supervision
• Standardize brand of oxytocin throughout the country to limit confusion on storage requirements

Globally

• Increase evidence base on storage of oxytocin