

NEWSLETTER N° 41 – October 2006

PHARMACIENS SANS FRONTIERES COMITE INTERNATIONAL

Counterfeiting and medicine trafficking: This is what is currently troubling the pharmacy universe and the media, as if the problem had arisen only recently, like an explosive epidemic, while southern countries have struggled with the problem for 20 years. The reason for the expansion of counterfeiting is a crucial need for medicines among those who do not have access to them.

The only actions that could really affect counterfeiting in poor countries are: working towards meeting the demand; increasing geographical and financial access to essential drugs of assured quality for the population; setting up reliable supply and distribution systems; ensuring that health centres are financially viable and ensuring training and motivation of staff. Then, and only then, can the population be made aware of the dangers of street medicines. Because a reliable alternative is available.

The people in Africa, Latin America or South-East Asia are not suicidal. Why would they run the risk of putting their lives and that of their children in danger if protected health care systems offered them treatments and medicines at an affordable price?

When these people will have access to quality health care, they will not go to the illicit market to buy less expensive treatments. Without demand, supply will dry up. It is not realistic to try to fight supply before meeting demand.

Visit the PSFCI website at www.psfc.org, to read the article in French under “Actualités”. The English version will be available soon.

EVENTS

Bamako, a film by Abderrahamane Sissako that needs to be seen:

“As many countries had difficulties repaying their debts, rich countries imposed, in the early 80’s, structural adjustment policies that set the rules of the game for millions of people. International financial institution officials were granted the power to impose on the most debt-ridden countries’ governments a policy supposed to balance their budgets. Most Sub-Saharan African countries are under structural adjustment programmes these days. These programmes based on neoliberal principles serve rich countries’ vested interests. The reforms imposed on Southern countries have always been the same while, paradoxically enough, they are far from being implemented in Northern countries : suppression of state subsidies (in agriculture, textiles), dismantlement of public services and job cuts in the public sector (school teachers, doctors). In debt-ridden countries, privatization of State-owned firms which managed natural resources, water electricity, transport and telecommunications, has always been carried out in the interest of rich countries’ multinationals. African civil society spokesmen have taken proceedings against the World Bank and the IMF whom they blame for Africa’s woes.”

The national drug policies of the **states of CEMAC** (The Economic and Monetary Community of Central) are being harmonised.

The meeting of May 2005 in Yaounde (Cameroon) had enabled the participants to set out key strategic and operational initiatives aimed at developing a common drug policy in the CEMAC zone.

The meeting of 12 and 14 September 2006 in Brazzaville aimed to define a mechanism to harmonise the policies.

<http://www.congo-site.com/pub/fr/v4x/actualites/article.php?num=5435>

The harmonisation of national drug policies may eventually enable these countries to consolidate orders of essential generic drugs to obtain large economies of scale and give their populations better financial access to drugs.

Diplôme Inter Universitaire Politiques de santé et gestion pharmaceutique dans les pays en développement (Inter-University Diploma “Health policy and drug management in developing countries): <http://ispb.univ-lyon1.fr/DIU/index.htm>

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This course is designed for all health professionals wanting to work in health projects with a “health product” component implemented in developing countries or in limited-resource countries. This course aims to enable participants to understand and analyse situations and to work effectively in projects.

CONTENTS

Issues of access to health products (20 hours)

International health policies (25 hours)

Drug policies (25 hours)

Health product management (30 hours)

Dates :

4 days in May, 10 days (2 weeks course) in late June / early July, 3 days in early September.

Level: Post-graduate level. Pharmacist, medical doctor, dental surgeon.

ReMeD Round Table at the 57th International Pharmaceutical Days on 17 November 2006 on “How to better manage chronic diseases in developing countries”. University of Paris V, 4 avenue de l’Observatoire, Paris. Programme available at <http://www.remed.org>

Drug donations, a remedy that may prove worse than the disease

For International Solidarity week, the film TIIM will be screened by CERAPCOOP (Centre de Ressources et d’Appui pour la Coopération Internationale en Auvergne) on 13 November at 7pm in Clermont-Ferrand (Salle Conchon). It will be followed by a post-film discussion with PSFCI.

MISSIONS

Cambodia:

The HIV/STI prevention and treatment programme for sex workers and high-risk people in Phnom Penh, which is funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria, continues as part of the National AIDS programme. The activities carried out under the previous programme (2003-2006) continue until 2011.

Haiti:

The development programme funded by the European Development Fund (EDF) for EUR 2 million will start on 6 November. It will last 2 years and will involve ensuring access and availability of subsidised essential generic drugs for the population living in the department of the Artibonite (1,070,397 people).

The departmental outlying depot, 6 administrative health units, and their client facilities: are targeted by the programme: rehabilitation of facilities, introduction of management tools, training of staff, initial provision of drugs to the departmental depot, setting up of a step declining subsidy system until a cost-recovery system can be implemented, education of the population, follow-up.

In compliance with the French data protection act in the law of 6 January 1978 (CNIL), you have the right to access and correct information about yourself. You can exercise this right by writing to PSF-CI Service informatique 4 Voie Militaire des Gravanches 63100- Clermont-Ferrand (France).