

Presentation of Results of the Rapid Assessment Protocol for Insulin Access in Mozambique



David Beran, Project Coordinator
International Insulin Foundation

Background information

- Diabetes
- Insulin
- Type 1 diabetes and insulin in developing countries
- Incidence and prevalence of diabetes
- International Insulin Foundation (IIF)



Rapid Assessment Protocol for Insulin Access (RAPIA) :

Multi-level assessment of Health system

Macro

- Ministry of Health
- Ministry of Trade
- Ministry of Finance
- Central Medical Store
- National Diabetes Association
- Private/Public drug importer
- Educators

Meso

- Regional Health Organisation
- Hospitals, Health Centres, etc.
- Pharmacies, Drug Dispensaries

Micro

- Healthcare Workers
- Traditional Doctors
- Patients



Perspectives on the problem of access to Insulin and Diabetes care

What information does the RAPIA provide:

- Study the path of Insulin from its arrival in the country
- Study the path of care
- Other problems



Implementation of the RAPIA in Mozambique

- Why Mozambique?
- Three areas - Maputo, Beira, Lichinga
- Interviews carried out



Type 1 Diabetes in Mozambique

- Official statistics do not exist
- IDF estimate - 928 people
- IIF estimates based on HCM data

Location	Population	Prevalence of Type 1 diabetes based on HCM data	Register	Proportion present
National	17,655,000	1,598	-	-
Lichinga	148,560	13	2	15%
Beira	397,368	36	20	56%
Maputo Province	2,000,000	181	181	100%

Diabetes in Mozambique

- Life expectancy
- Life expectancy varies greatly between areas

Age Range	0-14	15+
National (IDF estimate)	1.5	12.3
Maputo	3.8	20
Beira	2.1	11.1
Lichinga	1.5	2.9

Mozambique's insulin supply

- Rapid, Intermediate and Slow acting insulin on National Formulary
- Insulin costs - US\$ 603,824.00 in 18 months
- Equals 10% of government expenditure on medicines
- Problems with quantification of needs

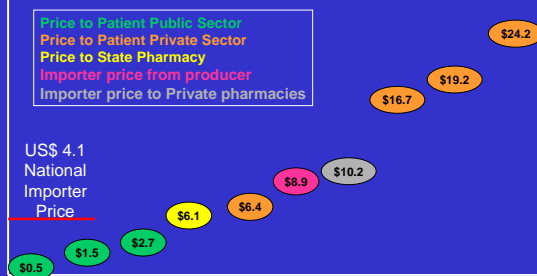


Mozambique's insulin supply

Province	Insulin needed per year in vials for all Type 1 patients	Insulin Ordered (percentage of total)	Insulin surplus or shortage	Number of people with Type 1 diabetes based on insulin ordered
National	11,960	59,657	47,697	4,589
Niassa	1,051	150 (0.3%)	(901)	12
Sofala	1,747	1,697 (2.8%)	(50)	131
Maputo Province	2,353	46,130 (77.3%)	43,777	3,548

Prices of Insulin in Mozambique

Price US\$



Access to insulin and diabetes care in Mozambique

- Regional and Central Hospitals
- Associação Moçambicana dos Diabéticos (AMODIA)
- Problems accessing syringes
- Problems with diagnosis
- Training
- Guidelines and referral pathways
- Curandeiros



Important points to note

- Distribution system for medicines works well
- No problems with cold chain
- No problems with quality of insulin
- No black market for insulin



Summary of Problems

- Problems with communication between Medimoc/CMAM and Hospitals/Health Centres
- Problems with Quantification
- No data on diabetes in Mozambique
- Lack of tools for diagnosis

Summary of Problems

- Social Fund Regulations on drug prices* not applied
- Absence of care guidelines
- Lack of appropriate training for health workers
- Lack of diabetes specialists

* Social Fund Regulations for Medicines and Food Supplements, Boletim da Republica, 4 Suplemento, Decreto no. 4 16/88, 27th December 1988

Summary of Problems

- Lack of diabetes clinics
- Lack of definition of AMODIA's role
- Lack of knowledge about diabetes
- Patients do not have access to subsidised insulin
- Create proper environment for health of people with diabetes

Summary of Problems and Recommendations

- Problems with communication between Medimoc/CMAM and Hospitals/Health Centres
 - Reporting and control mechanisms
- Problems with Quantification
 - Reporting and control mechanisms
 - Creation of register/surveillance system
- No data on diabetes in Mozambique
 - Creation of register/surveillance system
- Lack of tools for diagnosis
 - Increase tools where necessary

Summary of Problems and Recommendations

- Social Fund Regulations on drug prices not applied
 - Clarification/enforcement of this regulation
- Absence of care guidelines
 - Creation of care guidelines
- Lack of appropriate training for health workers
 - Create appropriate training courses
- Lack of diabetes specialists
 - Identify and train specialists
- Lack of diabetes clinics
 - Creation of diabetes clinics

Summary of Problems and Recommendations

- Lack of definition of AMODIA's role
 - Definition of AMODIA's role in diabetes in Mozambique
- Lack of knowledge about diabetes
 - Create awareness campaign
- Patients do not have access to subsidised insulin
 - Improve distribution and create means for people to access insulin
- Create proper environment for health of people with diabetes

Conclusion

- IIF will coordinate ways to put recommendations into practice
- First step in creating adequate environment for people with diabetes
- This research has implications for many chronic diseases
- Example of Tanzania shows that care for diabetes can be undertaken in resource poor settings