Expanding Access to Essential Medicines for Child Health:
The Impact of USAID’s Partnership with PQM and PQM+

Access to essential medicines is a significant challenge in low- and middle-income countries, particularly for the treatment of common diseases in children and pregnant women.

Objectives
The United States Agency for International Development (USAID)-funded Promoting the Quality of Medicines plus (PQM+) and its predecessor PQM programs have supported the expansion of local production of amoxicillin dispersible tablets (DT) for the treatment of diarrhea in children and iron/folic acid (IFA) tablets for women in pregnancy.

Local Production
Four manufacturers in Ghana, Nigeria, Pakistan, and Nepal have received approval or local authorization to produce these essential medicines through the PQM and PQM+ programs.

Support Provided
The manufacturers were supported in complying with Good Manufacturing Practices (GMP), product development, sourcing high-quality active pharmaceutical ingredients (API), and improving their facilities. PQM also supported these manufacturers in conducting palatability and stability studies, developing dossiers, responding to questions, and preparing for official audits.

WHO Prequalification and Local Market Authorization
Currently, PQM+ is supporting nine manufacturers of amoxicillin DT for WHO prequalification and local market authorization and one manufacturer of IFA. The manufacturers faced several gaps, deficiencies, and challenges such as non-compliance with GMP, inefficient understanding of product development, inability to source API from WHO-PQ approved manufacturers, and lacking documentation. PQM+ provided comprehensive support to the manufacturer in building capacity for the above deficiencies, hands-on training, product development, dossier compilation, SOPs development, QMS, mock audit, CAPA closure and totality of manufacturing.
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Impact

The expansion of local production of amoxicillin DT and IFA tablets has the potential to significantly reduce the burden of diarrhea in children and anaemia in pregnant women, respectively. The PQM and PQM+ programs demonstrate the importance of partnerships between governments, donors, and the private sector in addressing global health challenges. The assistance builds on UNCoLSC to shape the local delivery markets, quality, supply, demand, to improve the access and availability of Amoxicillin DT to simplify the administration and dosage of treatment for pneumonia.

Conclusion

This support, funded by USAID and implemented by USP through the PQM+ program will improve access to essential medicines and will contribute to the reduction of the burden of diarrhea in children and anaemia in pregnant women. This support also emphasizes the importance of partnerships between governments, donors, and the private sector in addressing global health challenges.

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