

# Stop TB Partnership/GDF: Procurement Support and Updates on Efforts to Expedite Access to New, WHO-Recommended DR-TB Regimens

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*Regional workshop on accelerating the uptake of the latest WHO guidance on the management of DR-TB in the African region*

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# Presentation Outline

- Why supply chain matters for TB treatment
- Global Drug Facility (GDF): overview of available products and services
- GDF's support to African countries
- Scale up of new DR-TB regimens in African countries
- Take home points
  
- GDF Supply Chain Cycle

# Why Supply Chain Matters for TB Treatment?

- Absence of TB products would be catastrophic for individuals, public health, and society. Timely screening, diagnosis, and treatment are crucial for saving lives, preventing disease spread, reducing healthcare costs, and achieving global health goals.
- Supply chain for TB products is a complex process involving sourcing, procurement, storage, and distribution. It ensures continuous and timely availability of quality-assured diagnosis and treatment.
- Due to the small and complex TB market, interventions from government and supranational organizations are necessary to ensure the availability and access to essential TB products.

# Global Drug Facility

## VISION OF SUCCESS



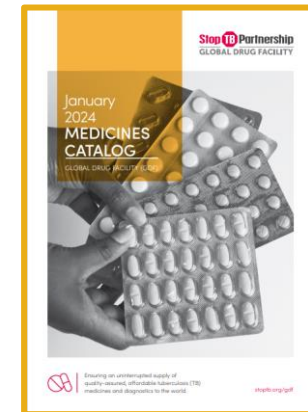
Worldwide access to TB products through sustainable, viable global markets that deliver innovative, quality-assured, affordable TB products

- UN enterprise within Stop TB Partnership hosted by UNOPS, funded largely by USAID
- Largest procurer of TB medicines and diagnostics
- Certified under the ISO 9001 Quality Management System
- Established in 2001 to create a market & promote access to quality-assured DS-TB medicines extended to products needed for screening, diagnosis, prevention, and treatment of all forms of TB for all groups of the population

GDF Catalogues: <https://www.stoptb.org/global-drug-facility-gdf/gdf-product-catalog>

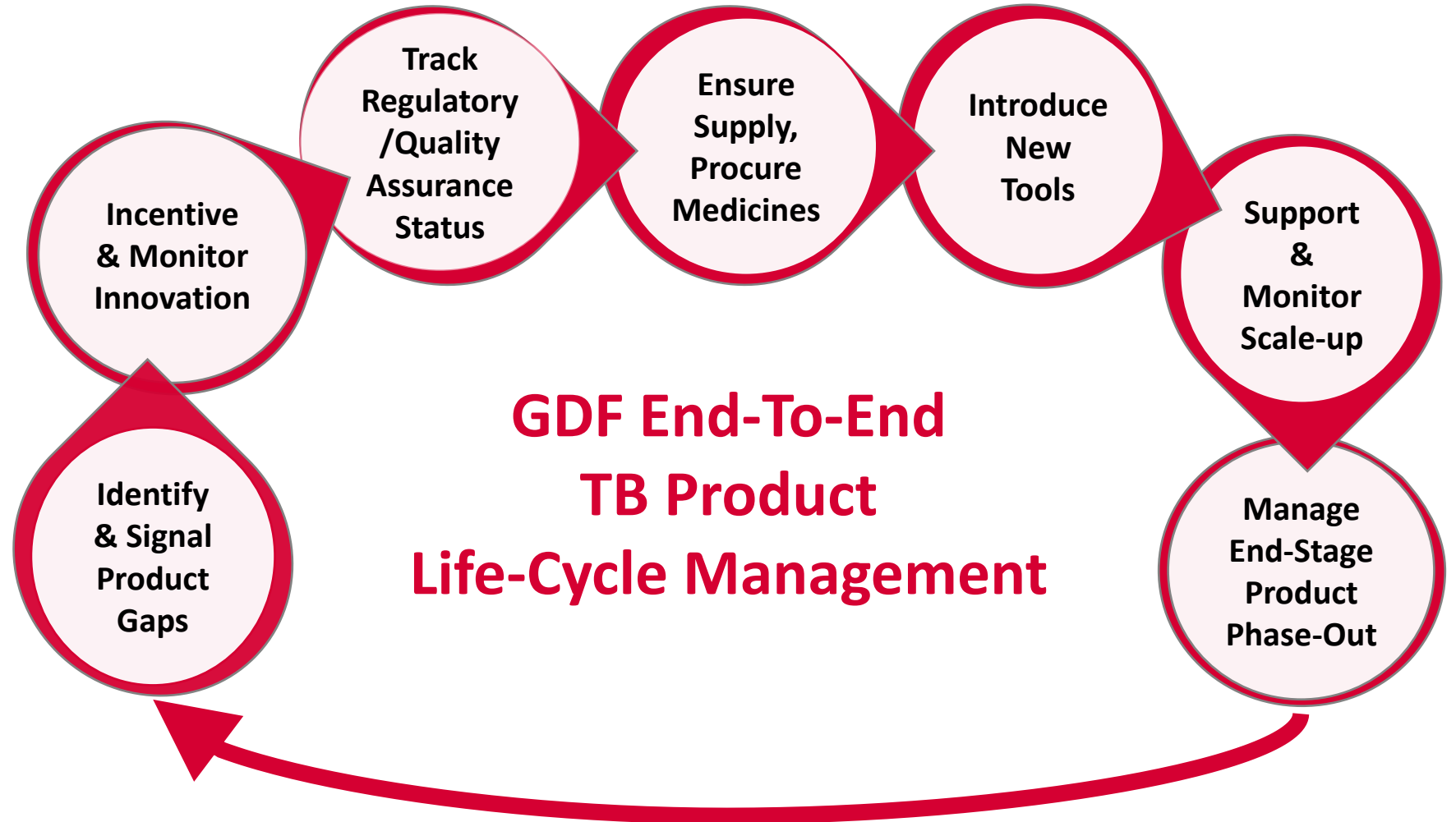
- Over 500 diagnostics, medical devices, and other health products
- All WHO-recommended TB medicines for all forms of TB, including child-friendly formulations

**No supply constraints for any medicine for DR-TB regimens, including BPaLM**



## GDF's Market-Shaping to Optimize Access to Medicines

The goal is to have quality, optimized, affordable products developed and accessible to those who need them as quickly as possible



# GDF's Added Value Services



**Comprehensive Technical Assistance (TA) and Capacity Building (CB)** delivered by the Regional Technical Advisors to GDF Priority countries (53 globally, 29 in Africa) to strengthen TB PSM systems and facilitate the rapid uptake of new TB tools. Depending on resource availability, additional countries may receive support.



**The Flexible Procurement Fund (FPF)** helps countries facing administrative constraints by bridging payments until domestic funds are available.



**The Strategic Rotating Stockpile (SRS)** reduces delivery lead time, mitigating stockout risks and ensuring timely access to essential products.



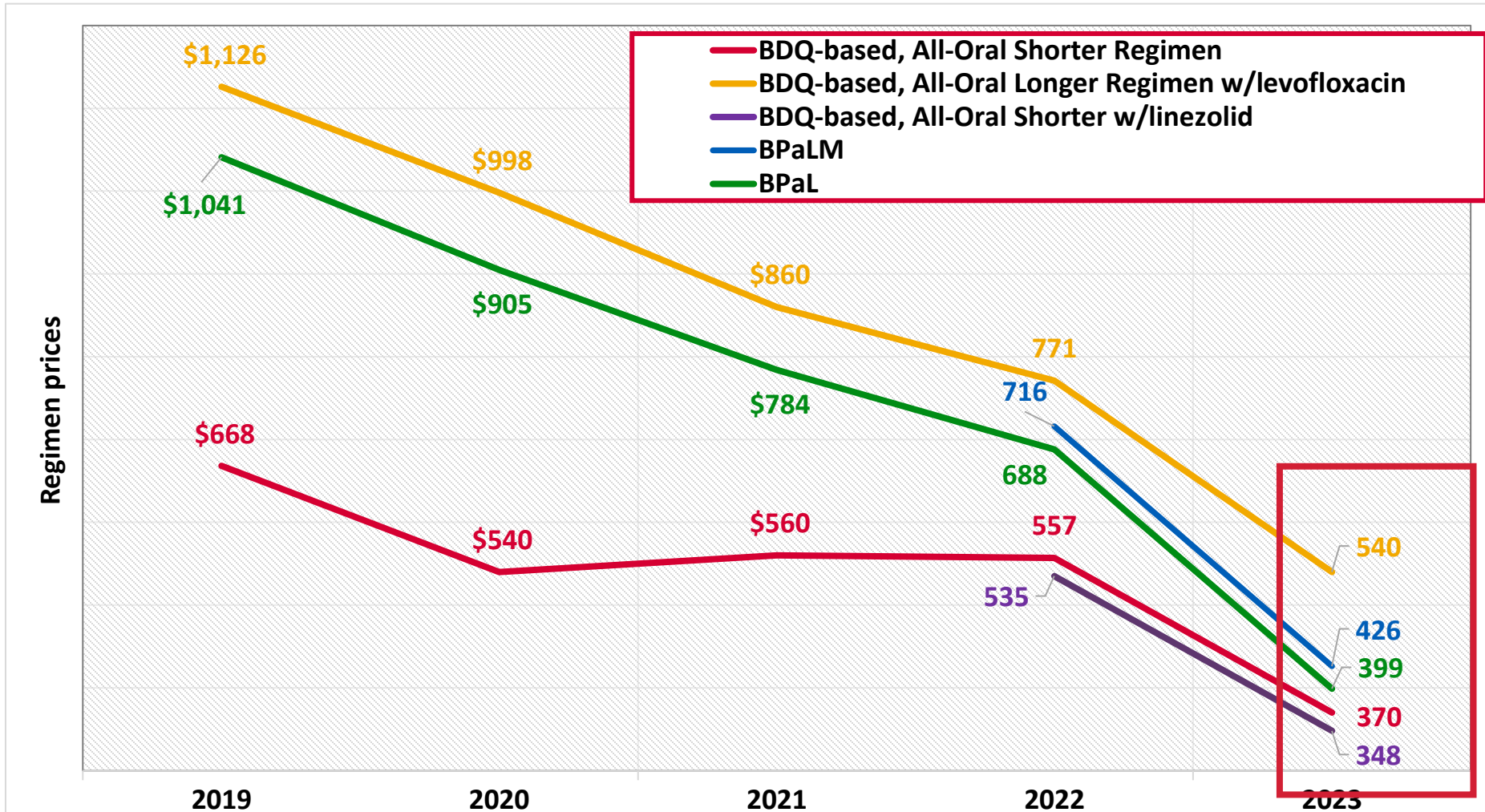
**Product consolidation** at the Procurement Agent's warehouse supports clients and suppliers by delivering full treatment regimens, reducing costs and administrative burden, and improving production planning.



**Product prioritization** in short supply ensures equitable access despite supply challenges.

# GDF Estimated Prices - DR-TB Treatment Regimens - Adults

GDF's current prices can be found here: <https://www.stoptb.org/buyers/plan-order>



## Historic price reduction in 2023:

- 55% for bedaquiline
- 30% for delamanid
- 20% for GeneXpert MTB/RIF diagnostic cartridges
- 25% for GeneXpert XDR cartridges

Regimen price calculation: BDQ treatment duration was 26 (rather than 24) weeks. Weight band - 46 – 55 kg. The lowest price used available for that product from all suppliers contracted with GDF

# GDF Estimated Prices - DR-TB Treatment Regimens - Children

GDF's current prices for key regimens can be found here: <https://www.stoptb.org/buyers/plan-order>

Regimen Composition	Regimen Duration	Weight Band	Estimated Lowest Regimen Prices (USD)
4 Bdq (6 months) Cfz E Hh Lfx Eto Z/ 5 CfzLfx Z E (Bdq-based All-Oral Shorter Regimen)	9 months	10-<16 kg	\$647
		16-<24 kg	\$930
12 Bdq (6 months) Lfx Lzd Cfz Cs	12 months	10-<16 kg	\$775
		16-<24 kg	\$1159

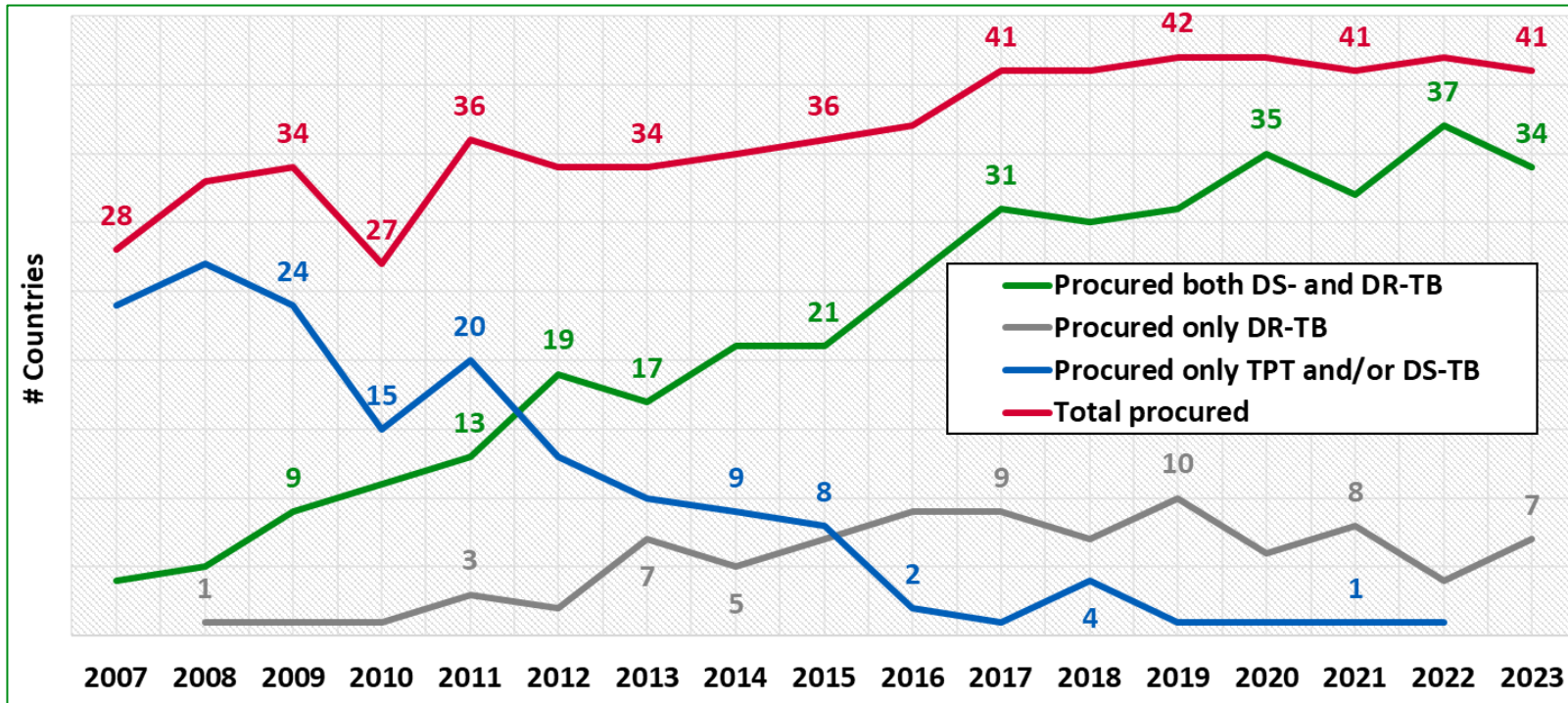
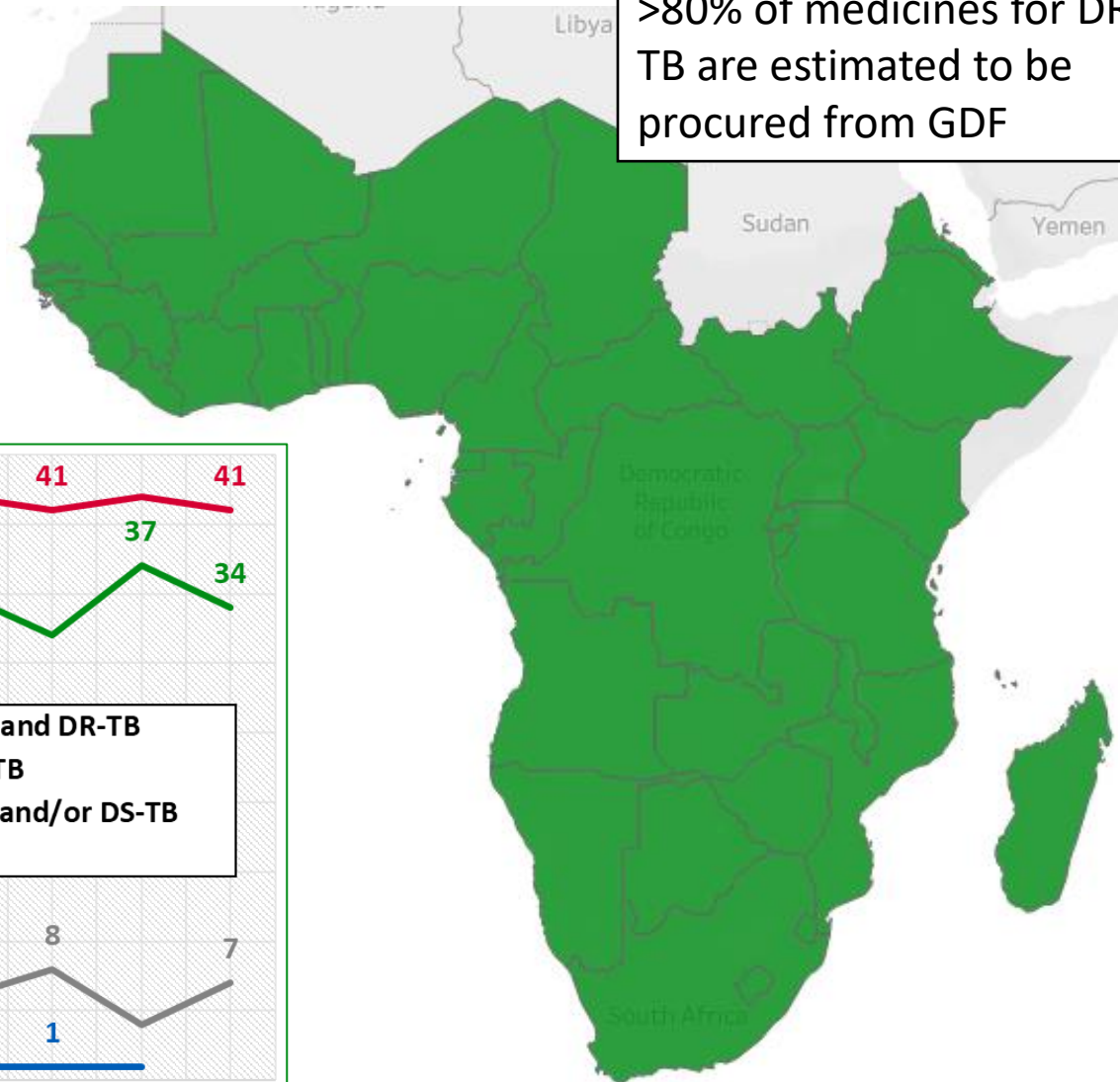
**All 11 WHO-Recommended DR-TB Medicines for children are available & accessible despite the market size of <1,000 treatments per year**



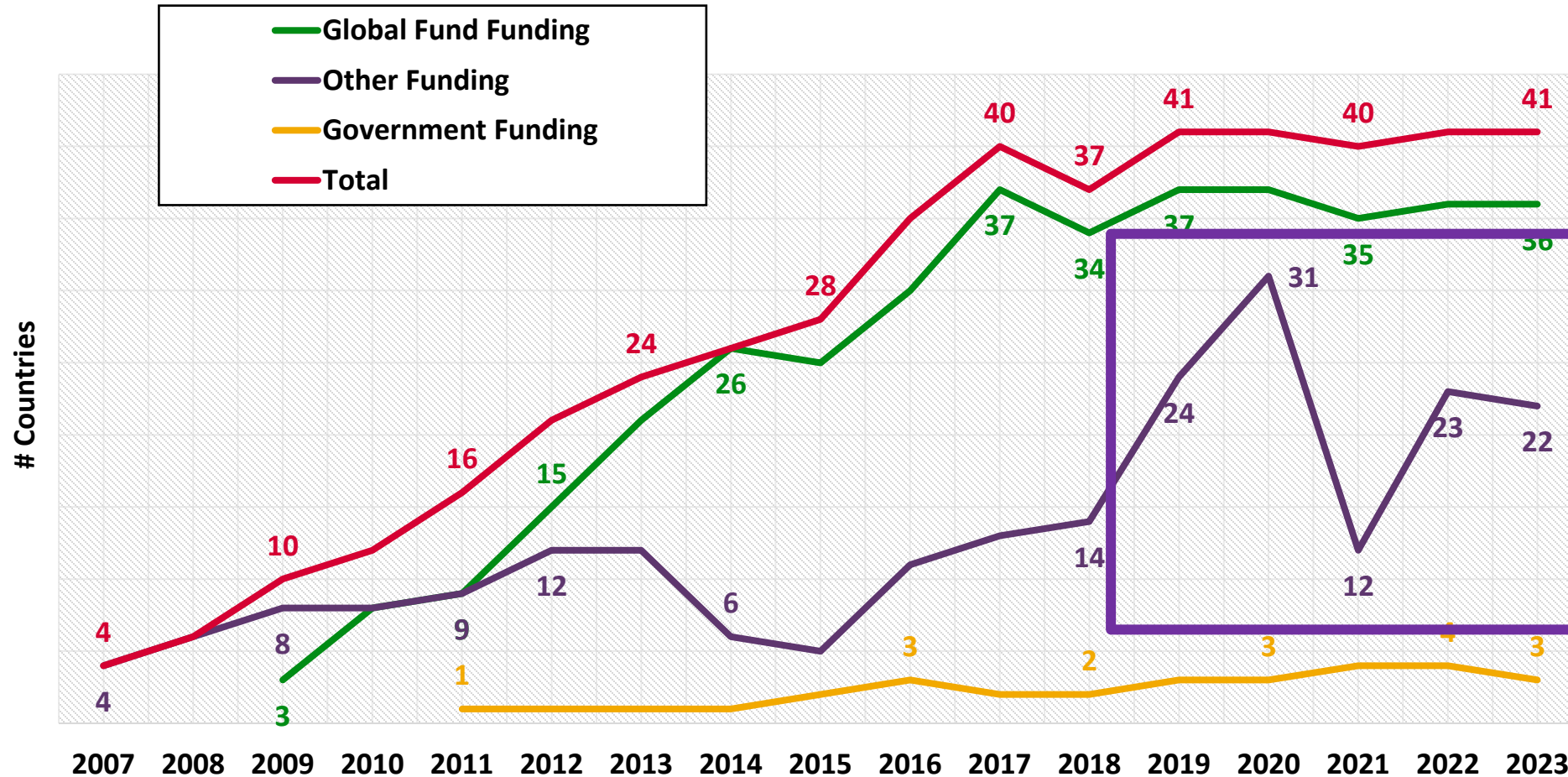
# African Countries Procuring Medicines from GDF: by product line 2007 - 2023

- 45/47 countries have procured TB medicines from GDF at least once
- 41/47 countries have procured TB medicines from GDF regularly for the past five years

>80% of medicines for DR-TB are estimated to be procured from GDF

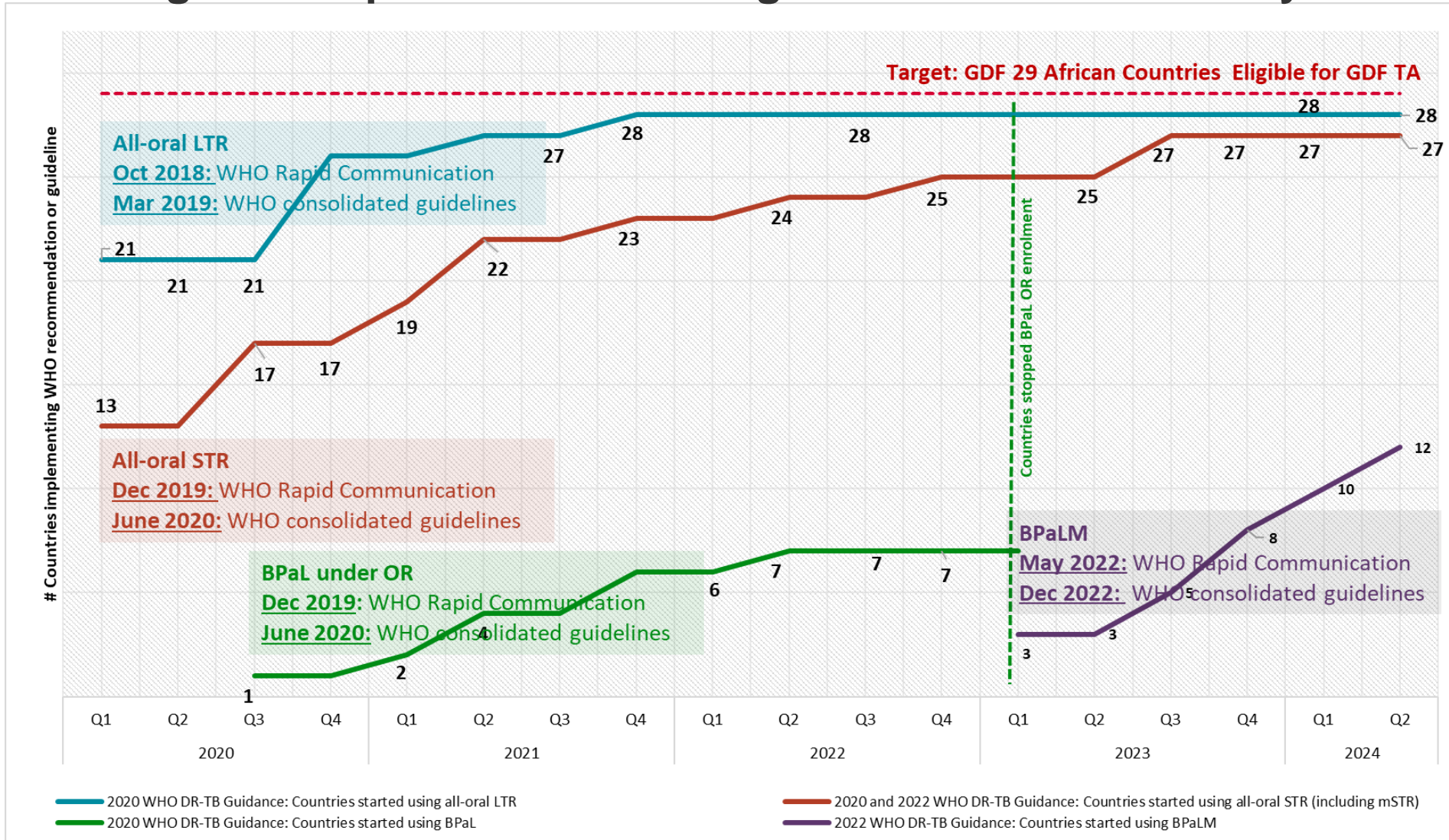


# African Countries Procuring DR-TB Medicines from GDF: by Funding Source 2007 - 2023



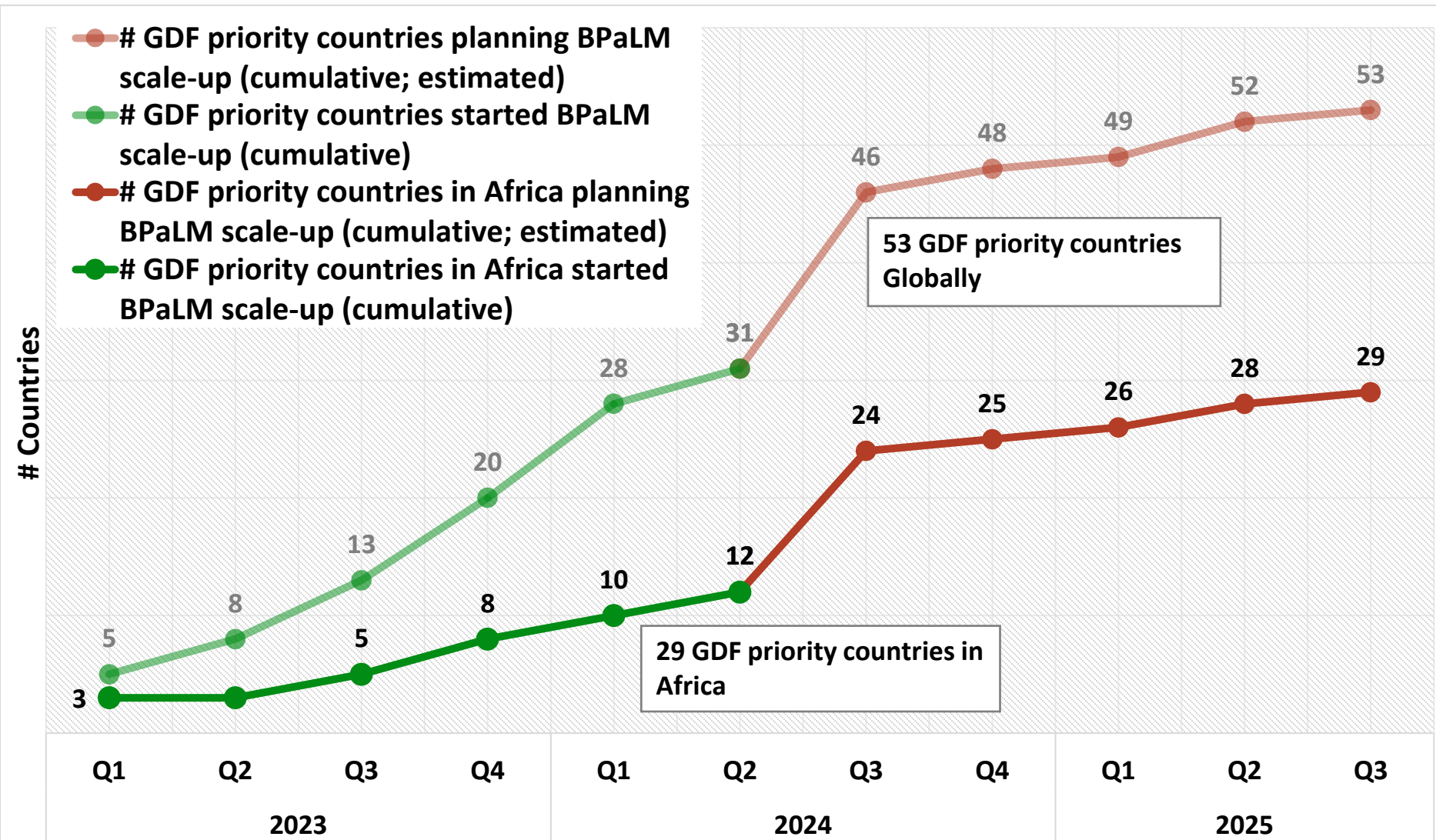
Other funding – primarily for pediatric DR-TB medicines: since 2018, 28 countries have benefited from the Government of Japan-funded GDF launchpad

# Tracking Scale-up of new DR-TB regimens in 29 GDF Priority Countries in Africa



- Transitioning to all-oral regimens took over three years
- All countries have committed to starting BPaLM within one year, and over 30% have already begun implementation

# BPaLM Scale-Up in GDF Priority Countries: 53 Globally, 29 in Africa



All 29 countries started or plan to scale up the BPaLM:

- 12/29 started.
- 17/29 have plans to start, of which 10/17 have postponed the roll-out dates.

12 countries plan to roll out BPaLM in the next three months, of which:

- 3/12 have not yet ordered Pa200
- 3/12 received shipments in late 2023 but have not started yet
- 6/12 have placed orders timely and either received them recently or expect them shortly

# Key Challenges for Introduction and Scale-up of New Regimens (GDF's Observation in 29 priority Countries)

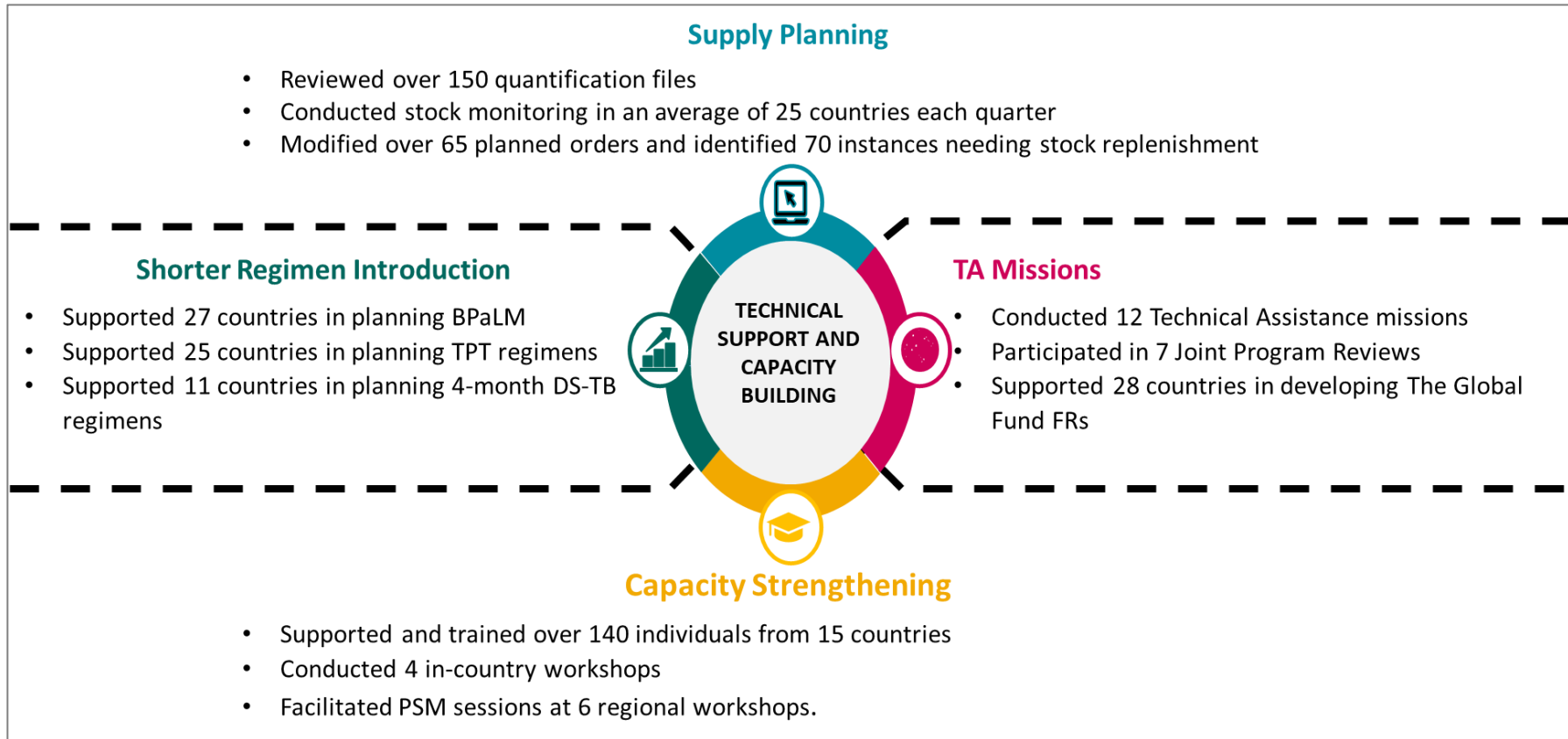
## **Non-PSM-related issues that are essential for the introduction and scale-up of new regimens:**

- Delayed revisions of treatment guidelines or other necessary regulations.
- Insufficient laboratory capacity.
- Delays in training healthcare professionals or the absence of such training.
- Delays in allocating and disbursing domestic funds to procure sufficient quantities of medicines.

## **PSM-related issues that are essential for the introduction and scale-up of new regimens:**

- Not readily available patient enrollment data per regimen, or regimen composition data, affects quantification.
- Non-adherence to the enrollment plan, including by regimen proportions, affects the costed procurement plan.
- Non-adherence to transition timelines and frequently changing transition dates affect TB medicines' supply plan.
- Delayed order placement of medicines leads to the need for emergency orders, which heavily impacts GDF operations.
- Potential wastages due to existing stocks of medicines other than those needed for new regimens.
- High turnover of PSM staff, leading to inadequate PSM capacity.

# GDF's TA to 29 GDF priority African countries: Jan-2023 to May-2024

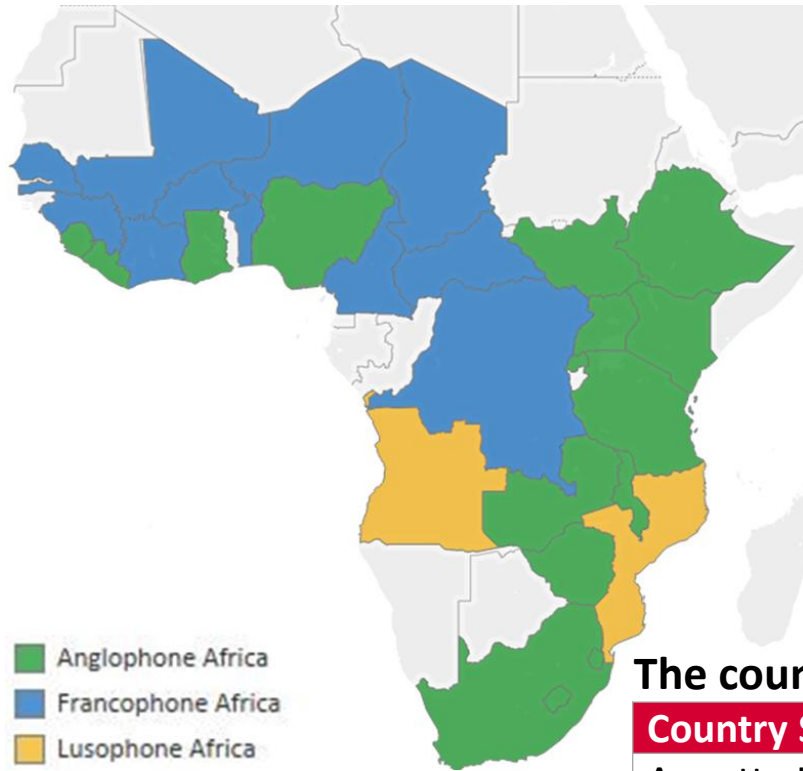


GDF supports and encourages TB programs to update quantification files regularly, regardless of the funding source for TB medicines procurement

**This will be discussed in the next session, which is of utmost importance for our collective understanding.**

# GDF for African Countries

All 47 African countries are eligible to procure TB products from GDF and 29 are eligible for technical assistance



## Technical assistance to 29 African countries

Regional Technical Advisor	Email Address	Country Supported
Arsene Ouedraogo	<a href="mailto:Arseneo@stoptb.org">Arseneo@stoptb.org</a>	Burkina Faso, DRC, Guinea, Côte d'Ivoire, Cameroon, Senegal
Floribert Biziyaremye	<a href="mailto:Floribertb@stoptb.org">Floribertb@stoptb.org</a>	Angola, Benin, CAR, Chad, Mali, Niger, Rwanda
Ekpeno Akpanowo	<a href="mailto:EkpenoO@stoptb.org">EkpenoO@stoptb.org</a>	Nigeria, Ghana, Lesotho, Liberia and Eswatini
Maria Ochigbo	<a href="mailto:Mariao@Stoptb.org">Mariao@Stoptb.org</a>	Morocco, Kenya, Sierra Leone, South Sudan
Salama Mwatawala	<a href="mailto:salamam@stoptb.org">salamam@stoptb.org</a>	Tanzania, Ethiopia Zambia, Malawi, Uganda, Somalia

## The country supply support to all 47 African Countries

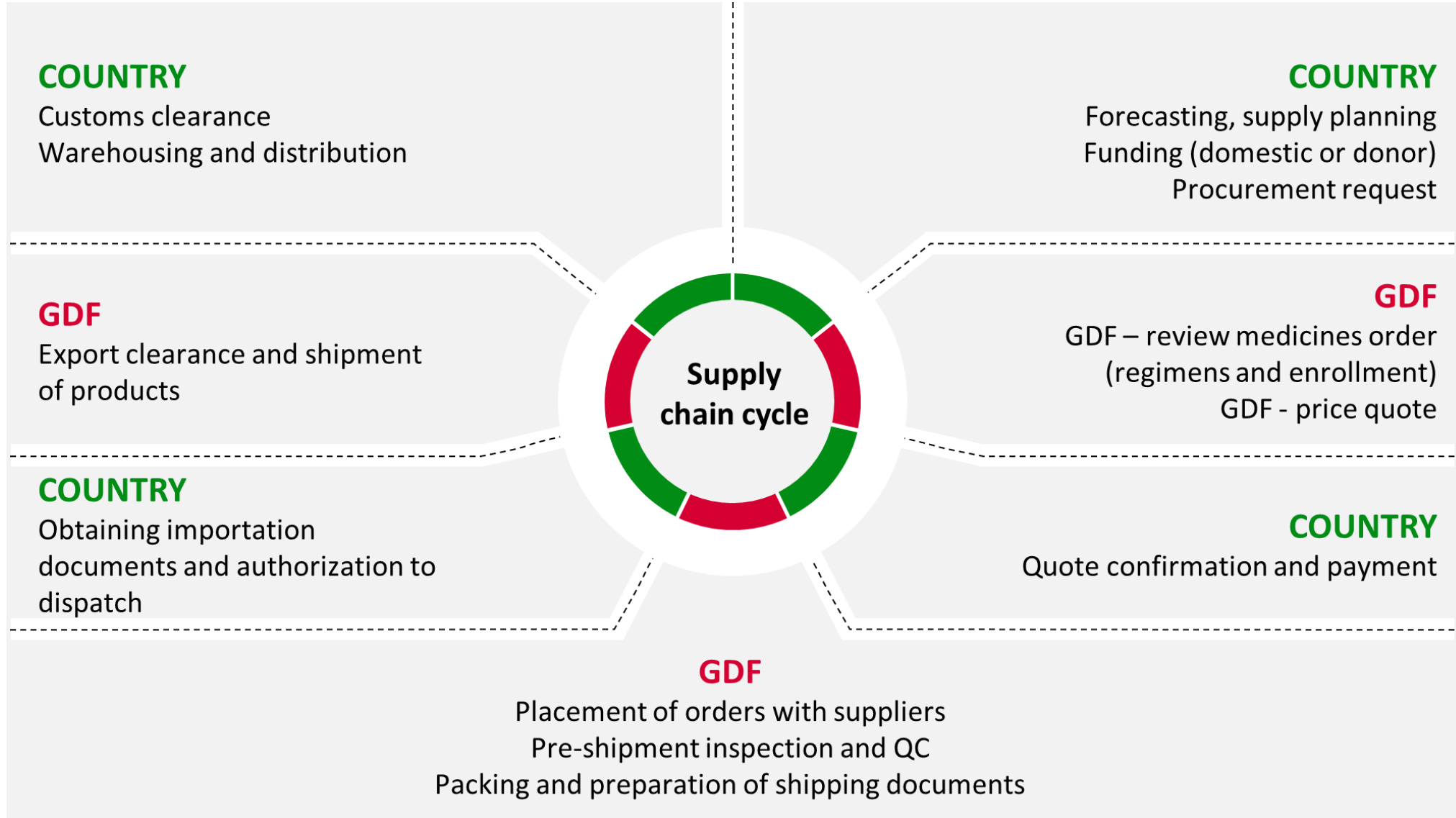
Country Supply Officers	Email Address	Country supported
Annette Kasi Nsubuga	<a href="mailto:Annetekn@stoptb.org">Annetekn@stoptb.org</a>	Anglophone countries
Anna Harusovska	<a href="mailto:Annah@stoptb.org">Annah@stoptb.org</a>	Anglophone countries
Arnaldo Bonucci	<a href="mailto:Arnaldob@stoptb.org">Arnaldob@stoptb.org</a>	Lusophone countries
Cedric Andres	<a href="mailto:cedrica@stoptb.org">cedrica@stoptb.org</a>	Francophone countries
Jayne Mphinga	<a href="mailto:jaynem@stoptb.org">jaynem@stoptb.org</a>	Francophone countries

# Take home points

- PSM plays a crucial role in the scale-up of new treatment regimens – without TB products, there can be no screening, prevention, diagnosis or treatment.
- GDF's End-To-End TB Product Life-Cycle Management and value-added services ensure that quality, optimized, affordable products are developed and accessible to those who need them as quickly as possible.
- GDF is a gateway to all WHO-recommended TB products at the lowest prices, covering the entire spectrum of TB care—from prevention to treatment—for all age groups and populations.
- There are no supply constraints for DR-TB treatments, including BPaLM medicines.
- All African countries can procure from GDF, and 29 countries are eligible for comprehensive PSM technical assistance.
- TB programs must carefully plan the uptake of new regimens and align procurement and supply plans with the scale-up plans. They must also place orders considering lead times to ensure timely shipment and smooth scale-up of new regimens (this will be discussed in the next session).
- GDF supports and encourages TB programs to regularly update quantification files, regardless of the funding source for TB medicines procurement, and place procurement orders according to the agreed-upon PSP plans (this will be discussed in the next session).



# GDF Supply Chain Cycle



# GDF Standard Delivery Lead Time

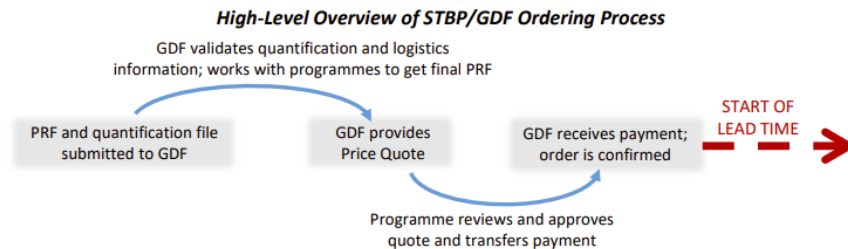
## Category and Product-level Procurement and Delivery Planning Guide

### Indicative Lead Times

1 June 2024

This document lays out indicative lead-times for planning purposes for TB products procured via the Stop TB Partnership's Global Drug Facility (STBP/GDF).

**Procurement and delivery lead-time information** is the time from order confirmation and receipt of payment by STBP/GDF to delivery to country. This information is provided at the category and detailed product level and is indicative based on current market knowledge to ensure on-time delivery and best value procurement. Below is a high-level overview of the STBP/GDF ordering process from initial submission of a procurement request form (PRF) until the final order confirmation and payment – when the lead time starts.



Users of this guide should account for country-specific processes related to finalizing the PRF, accepting quotes, and transferring payment when planning procurements.

### Reasons for prolonged overall lead time:

- Delays in order initiation
- Delays in price quote approval
- Delay in payment
- Requests for revision of quantities
- Requests for postponement or cancellation of orders
- Requests for changes in shipping documents
- Delays in green light for dispatch
- Lengthy custom clearance procedures

# GDF Tools to Inform Budgeting, Planning and Ordering

- GDF Catalogs and ordering lists <https://www.stoptb.org/global-drug-facility-gdf/gdf-product-catalog>
- Plan an order: <https://www.stoptb.org/buyers/plan-order>
  - Category and Product-level Procurement and Delivery Planning Guide
  - STBP/GDF Budgeting Prices
  - Indicative Reference Costs for Budgeting Purposes
- Place an Order <https://www.stoptb.org/place-order/place-order-medicines>
- Track orders via OMS <https://www.stoptb.org/buyers/track-order>
- Procurement Notices <https://www.stoptb.org/suppliers/procurement-notice>
- QuanTB link: <https://www.stoptb.org/global-drug-facility-gdf/gdfs-resources>

# Any questions?

# We continue to the practical session

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