MEDICINES CONTROL AUTHORITY OF ZIMBABWE

Surveillance of antimicrobial use in ZIMBABWE

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September 28–29, 2020

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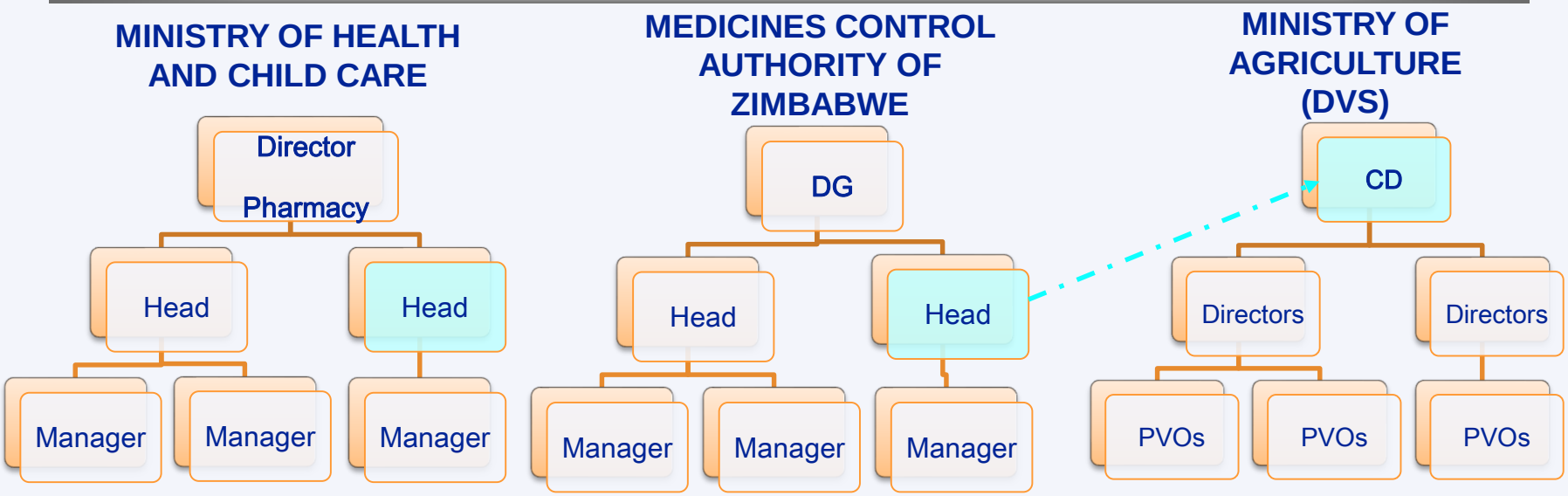
Presentation Outline

- Governance Structure for AMU Surveillance
- Activities conducted
- Challenges
- Future Plans

Oversight of Medicine Use



Medicines Control Authority of Zimbabwe is the **OIE Focal Point for Veterinary Medicines**; reports to Chief Director in the Division of Veterinary Services; **the OIE Delegate**.

Veterinary Medicines Governing Bodies

OiE
DELEGATE

OiE
FOCAL POINT

DVS
Min of Agriculture
Animal Health Act

MCAZ
MASC Act
DD Act

DRSS
Min of Agriculture
FFR Act

Biologicals; Vet Pesticides

All Medicines (VMPs, Vet vaccines, Vet pesticides)
Medicated Feed

Feed; Feed Additives

LIAISON IS KEY

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Animal Health Consumption data

- Zimbabwe (2013) started compiling & sending AM consumption data to OiE database, based on import data from the MCAZ
- Years submitted 2013-2019 and 2020 (work in progress)
- ToT on AM prudent use supported by FAO, 2016

Animal census

AMC data

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Human Health Consumption data

- Pilot study was conducted in the years 2017 and 2018 at MCAZ by MoHCC
- Study focused on AMC using retrospective data at MCAZ
- ToT of Health Professionals on AMC/AMU supported by WHO in 2019

Interventions towards better AMU/AMC

Time

2014

Drafting of Regulations for veterinary medicines (2014-2019)

Veterinary Medicines and Allied Substances Regulations (Draft form)

-withdrawal periods and MRLs included in the draft

-standalone regulations on veterinary medicines

2019

Drafting of API Regulations

Active Pharmaceutical Ingredients were not regulated previously. The law will result in regulation of APIs for use in both humans and animals

2020

Drafting of Medicated Feed Regulations

the regulations will result in farmers required to seek for prescriptions from vets in the use of antimicrobials in feed

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Challenges

- Limited Human Resources
- Limited National Budget allocation to human health, animal health and agriculture
- Circulation of poor quality medicines (*illegal vendors*) through porous borders
- Limited funding to conduct extensive surveillance of AMU in both human and animals health, we rely on import data (no **fully** automated systems yet)
- National Systems able to do AMC vs AMU
- Lack of centralized system or repository for a national AMU database

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Future Plans

- Develop tools for use in AMU/AMC
- Develop and National electronic database on AMC/AMU
- Implement sustainable supervision, audit and feedback mechanisms in health facilities by having functional HMTCs for both human and animal health
- Improve Infrastructure for appropriate storage of AMs (esp. at rural clinics) e.g. for cold chains and ambient temperature storage facilities
- Investigate of the presence and extent of poor quality medicines including counterfeits and unregistered medicines

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Thank You!

MEDICINES SHOULD BE **SAFE**, **EFFECTIVE** AND OF GOOD **QUALITY**

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