Essential Medicines and Health Technologies

Strategic issues

WHO works with Member States and partners to promote access to good quality essential medicines and to ensure their rational use by providers and consumers. These objectives are especially important in less developed countries and areas in the Western Pacific Region due to uneven access to and availability of medicines, the continuing distribution of substandard and counterfeit products, and the irrational use of medicines by providers and consumers. The Regional Framework for Action on Access to Essential Medicines (2011–2016) provides strategic direction for WHO’s collaboration with Member States.

Traditional medicine enjoys a rich history in the Western Pacific Region, with a variety of long-established practices that make important contributions to health. Efforts to promote evidence-based traditional medicine and to protect and conserve indigenous health resources are considered vital now that traditional medicine has become an increasingly prominent part of the global health-care market.

The quality of health technology management in many Member States can be improved by developing national health technology policies, improving medical device regulation, and preparing lists of essential medical devices and viable hospital maintenance services. Expanded data collection on the availability and use of medical devices is essential to enable development of a regional framework for action.

The ongoing roll-out of the Asia Pacific Strategy for Strengthening Health Laboratory Services (2010–2012) focuses on the development and implementation of a coherent national framework for laboratory services, with increased emphasis on the introduction of quality assurance systems in clinical laboratories. Strengthening laboratory-based surveillance of antimicrobial resistance has become a priority.

Throughout the Region, there is a need to secure safe and adequate blood supplies from voluntary non-remunerated blood donations and to promote quality assurances, especially related to virus screening.

In the area of transplantation, there is a need to strengthen regulatory oversight of clinical research and practice and to promote deceased donor programmes.

Action and results

The Regional Framework for Action on Access to Essential Medicines (2011–2016) was finalized at the sixty-second session of the Regional Committee for the Western Pacific in October 2011. A Workshop on Ensuring Access to Priority Medicines for Mothers and Children was organized in Manila in August 2011, providing recommendations for practical action.

An Intercountry Consultation on Improving Access to Essential Medicines and Diagnostics for Noncommunicable Diseases, held in Manila in August 2011, reviewed the current situation and planned country-specific actions.

WHO began a third round of data collection for the regional Price Information Exchange for selected essential medicines, a website that helps countries compare information on procurement prices in order to make medicines more affordable. WHO also began work on country profiles of the pharmaceutical sector.

In the Philippines, WHO supported the Philippines Health Insurance Corporation (PhilHealth) in designing an operating mechanism for covering medicines for outpatients. An initial package, targeting

To combat counterfeit medicines, WHO builds alliances between regulators and law enforcement agencies.
medicines for noncommunicable diseases, was launched in April 2012. Cambodia undertook a revision of its *Pharmaceutical Sector Strategic Plan (2005–2010)*, preceded by a pharmaceutical workforce survey.

In Viet Nam, WHO reached several milestones under the *Aide Memoire for Strategic Collaboration in Pharmaceuticals*, including the development of a new national medicines policy and essential medicines list, as well as the establishment of a national network for safety of medicines and pharmaceutical vigilance. In the Lao People’s Democratic Republic, WHO supported the revision of the national essential medicines list and the national standard treatment guidelines. China’s National Development and Reform Commission requested support from WHO to conduct a midterm assessment of the country’s essential medicines system.

In cooperation with the Bill & Melinda Gates Foundation, WHO supported four manufacturers of anti-tuberculosis medicines to apply for WHO prequalification in China. In Pacific island countries, WHO supported the development and revision of national medicines policies in Fiji, the Federated States of Micronesia, Palau, Tuvalu, Tonga and Vanuatu. Medicines legislation was developed and reviewed in Fiji and Tuvalu. Standard treatment guidelines with an emphasis on the rational use of antimicrobials were developed in Fiji, Palau and Tuvalu. WHO also supported Fiji, the Marshall Islands, Palau and Vanuatu to develop and strengthen their inventory systems for medicines.

Collaboration between medicines regulators and law enforcement agencies was strengthened by the creation of the STORM enforcement network led by INTERPOL. The network—consisting of regulators, police and customs officials from Mekong and South-East Asian countries—had its first meeting in Singapore in November 2011. An interregional workshop on combating substandard, falsely labelled and counterfeit medicines was hosted by Malaysia’s National Pharmaceutical Control Bureau to plan pilot implementation of a global monitoring system.

WHO held a training workshop on the rational use of antibiotics and antimicrobial resistance for member countries of the Association of Southeast Asian Nations (ASEAN), while the Federation of Asian Pharmaceutical Associations held a workshop on strengthening the pharmacist’s role in health-care systems.

Within Cambodia, a National Workshop on Antibiotic Resistance was held in November 2011. An inception workshop on an integrated surveillance study of antimicrobial resistance in the poultry supply chain and its linkages to related disease-causing microbes in humans was held in January 2012. The WHO Cambodia Office also contributed articles on antimicrobial resistance for publication in the *Health Messenger*—a journal for the nursing profession—to promote awareness on antibiotic resistance to the profession and other health workers.

In Viet Nam, WHO contributed to the development of the draft Viet Nam National Action Plan on Combating Antimicrobial Resistance.

An infection prevention and control programme has been started in Cambodia that includes assessment and training.
and is now developing a network for health-care-associated infection.

The Regional Office established a cross-divisional working group to coordinate actions and has developed a plan for combating antimicrobial resistance. Country assessments and support have been planned for three priority countries. The Philippines will be the first country to benefit from cross-divisional support.

The sixty-second session of the WHO Regional Committee for the Western Pacific endorsed the Regional Strategy for Traditional Medicine in the Western Pacific (2011–2020) in October 2011. Over the past year, WHO worked directly with Member States, including Cambodia and the Lao People’s Democratic Republic, to develop their national strategies on traditional medicine and to strengthen the quality control and registration system for herbal medicines. WHO also supported Viet Nam in promoting the delivery of available, accessible and affordable traditional medicine services through family kits in selected communities. With assistance from Malaysia, Mongolia and the Philippines, as well as active members of the International Classification of Traditional Medicine project, namely China, Japan and the Republic of Korea, WHO prepared a chapter on traditional medicine for the 11th revision of the International Classification of Diseases.

WHO reviewed and supported the development of national laboratory strategies in Cambodia, the Lao People’s Democratic Republic, Papua New Guinea, the Philippines and several Pacific island countries. It also provided support to the National Blood Transfusion Center in Cambodia in the areas of blood systems strengthening, retention of voluntary non-remunerated blood donors and quality assurance of blood screening. It gave additional support to Viet Nam’s Blood Transfusion Service to devise a costing model for blood centres and also reviewed the national blood and national medical equipment management policies of the Lao People’s Democratic Republic.

WHO supported the Philippines and the Lao People’s Democratic Republic on the development and implementation of medical device regulations, and collaborated with the ASEAN Secretariat to plan a training programme for Member States on regulatory systems for medical devices.

**Future directions**

WHO will continue to support Member States in their efforts to improve access to good quality medicines and their rational use, with the Regional Framework for Action on Access to Essential Medicines (2011–2016) as a guide. To combat counterfeit medicines, WHO will continue to strengthen collaboration between regulators and law enforcement agencies and will enhance its advocacy on access, quality and rational use of medicines. WHO will also bolster its collaboration with civil society organizations, including nongovernmental and professional organizations.

WHO will continue to support countries to determine the most accessible and affordable traditional medicine service delivery model in primary care and implement the Regional Strategy for Traditional Medicine in the Western Pacific (2011–2020).

In the coming year, WHO will also continue to roll out the Asia Pacific Strategy for Strengthening Health Laboratory Services (2010–2015).

Future directions for medical devices will focus on regulatory systems, essential medical device lists and hospital maintenance services. For blood safety, securing a sustainable supply of voluntary non-remunerated blood donations and quality assured virus screening will dominate. Strengthening regulatory oversight of transplantation will become increasingly important.