

Stop TB Partnership's Global Drug Facility's Technical Support through virtual participation in the quantification review of TB medicines for the Republic of Gabon 13th -17th May 2022

StopTB Partnership's Global Drug Facility provided virtual technical assistance to Gabon NTP in the quantification review of TB medicines for all forms of tuberculosis for The Global Fund TB funding proposal grant-making from 13th to 17th May 2022. Gabon is not a GDF priority country, however, based on the request of Gabon's NTP, GDF supported the program and assigned a GDF roster consultant. Thus, the assignment was jointly conducted by GDF roster consultant Angelo Makpenon and the Regional Technical Adviser Floribert Biziyaremye in collaboration with The GF Health Product Manager, the PSM focal points from the Ramnarine Medical Research Center (CERMEL) and National Tuberculosis Control Program (NTP).

The assignment aimed to support the country in the review of the quantification and costed PSM plan for TB medicines and assist the country in responding to TGF Technical Review Panel (RTP) questions related to the PSM section of the Global Fund's funding request and support Funding Request resubmission and during grant-making. The specific objectives were to:

- Support the NTP and stakeholders in the review and update of quantification, procurement, and supply planning (PSP) for TB medicines, aligned with the country's policy decisions and targets in response to the latest WHO recommendations on DR-TB treatment and TB preventive treatment, as communicated by the national stakeholders.
- Produce TB medicine quantification and PSM plan using the Global Fund – Health Product Management Template.
- Assist the country in transitioning to the new TB tools using QuanTB.

The GF TRP rejected Gabon's proposal twice - in October 2021 and in March 2022 and requested clarifications and revision of the proposal, including the PSM part. GDF supported the country and partners remotely to address all PSM-related comments by the TRP and helped to review the quantification of TB medicines for all forms of Tuberculosis (TB infection, Drug Sensitive (DS-TB) and Drug-Resistant TB (DR-TB)) and generate a costed procurement and supply plan. The envisioned TB grant will start on 1st July 2022 and end 31st December 2024. Medicines for DR-TB and ITB treatment, and diagnostics will be financed by TGF, while the first-line TB medicines will be funded by the government.

The quantification review was conducted based on the country data validated by the program. The country has already adopted all-oral shorter and longer regimens for the treatment of DR-TB in adults and children. However, the program has not yet decided on the inclusion of the new key changes in the treatment of DR-TB (BPAL/BPALM) and the revised DS-TB regimen in children and adolescents in the proposal. Regarding TB Preventive Treatment, the country has a clear plan to transition to 3HP from January 2023, which was considered in the updated costed procurement plan.

TPR indicated different issues including insufficiencies in value for money, insufficient efforts for community system strengthening and funding support for collaborative TB/HIV services. They highlighted discrepancies between programmatic documents in terms of financing and targets. GDF used the revised targets aligned with different documents to review the quantification of TB medicines and the results from the review show that the total budget required for TB medicines procurement is \$1,567,188.86 for the grant period from July 1st, 2022 to December 31st, 2024.

The DR-TB and TPT medicines costs which represent 34% of the mentioned amount will be funded by the Global Fund, while medicines for DS-TB treatment representing 66% of the total budget, will be financed by the Government. Data from the updated costed supply plan was used to fill the Global Fund– Health Product Management Template.

During the review, stock-out of Cfx (100), E(100), and H100 were observed, and Bdq(20) and H(300) will be out of stock from August 2022. However, the NTP still has quantity at health facilities to be used by the patients. This risk of stock out is mainly due to long processes of prepayment of products procured from GDF. The country was committed to expediting the payment of both DR-TB and DS-TB medicines to confirm the draft order and prevent the stock out. The program and partners are aware of the importance of revising treatment guidelines to facilitate the uptake of new regimens during the implementation period of the grant.