Antimalarial prescription practices for severe malaria cases in health facilities in Ethiopia, Nigeria and Uganda following training of health workers and introduction of injectable artesunate

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Key messages

- Training of health workers and supply of injectable artesunate (Inj AS) significantly increased the use of the recommended treatment for managing severe malaria cases
- However, support of the supply chain is also key to prevent stock out of the drugs at the health facility level

Introduction

Severe malaria is a life-threatening medical emergency that requires prompt and effective treatment to prevent death. The World Health Organization revised the severe malaria treatment guidelines, recommending injectable artesunate as the first-line treatment for severe malaria. With funding from UNITAID, Malaria Consortium is implementing the Improving Severe Malaria Outcomes project in Ethiopia, Nigeria and Uganda. The project has supported these three countries in the revision of the national treatment guidelines, training of health workers supply of Inj AS. We evaluated the antimalarial prescription practices for severe malaria following the training and introduction of Inj AS in the three countries using the data collected during the monitoring and evaluation (M&E) visits.
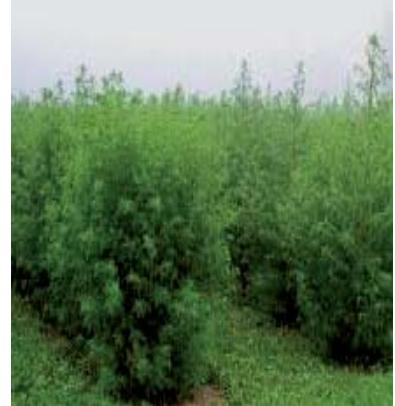
Methods

Thirty health facilities were randomly selected for routine M&E data collection in each of the countries. Between July 2014 and June 2015, the Health Management Information System (HMIS) focal persons at the selected facilities collected monthly data on severe malaria indicators, including antimalarial treatment, treatment outcomes and stockout rates.

Results

Country	No. of facilities trained	No. selected for M&E data collection	Reporting rate
Ethiopia	161	30	93%
Nigeria	65	30	90%
Uganda	352	30	90%

Treatment trends for severe malaria - Ethiopia

Treatment trends for severe malaria - Nigeria

Treatment trends for severe malaria - Uganda
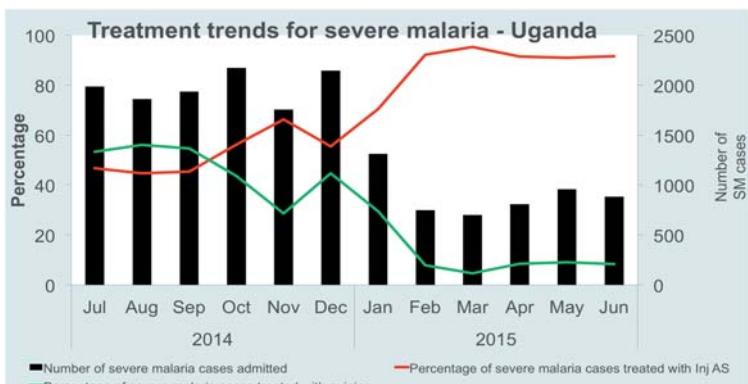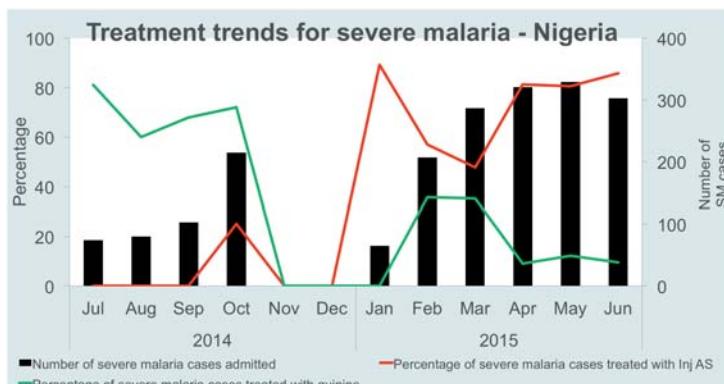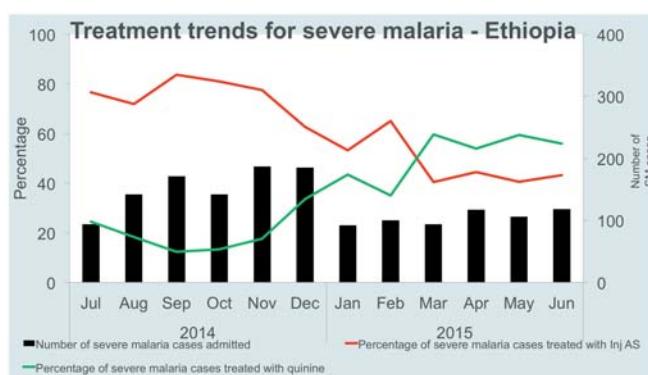
Note: Facility data between Nov 2014 – Jan 2015 unavailable due to industrial action by public health workers