Extending AMFm to Integrated Case Management of Malaria, Pneumonia and Diarrhoea in Drug Shops in Uganda

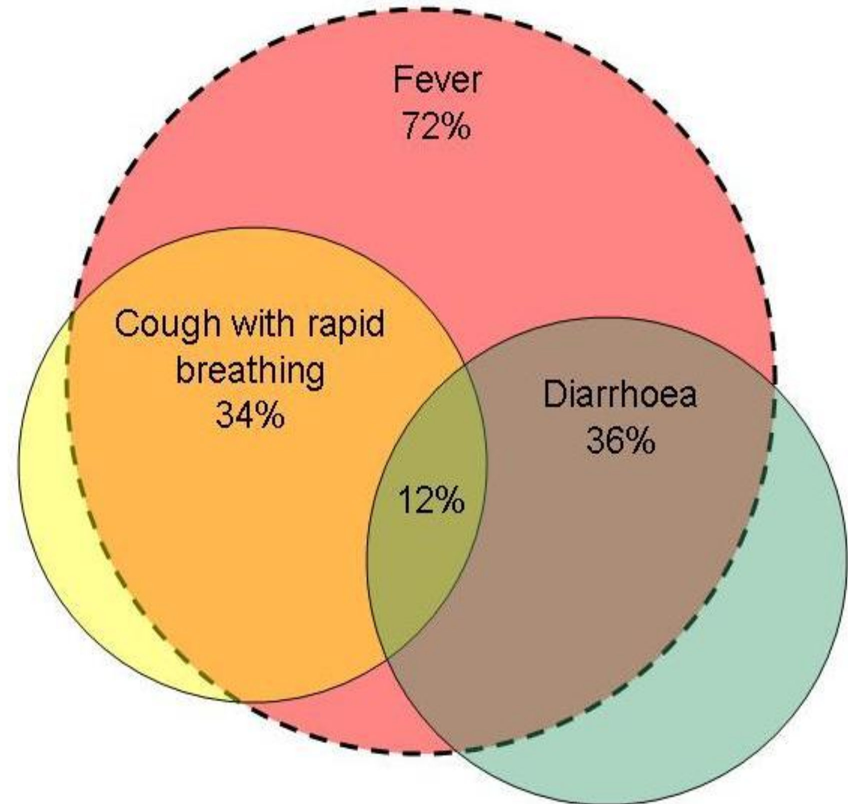
Phyllis Awor
Henry Wamani
George Jagoe
Stefan Peterson

UPPSALA UNIVERSITET

Karolinska Institutet

Background and Introduction

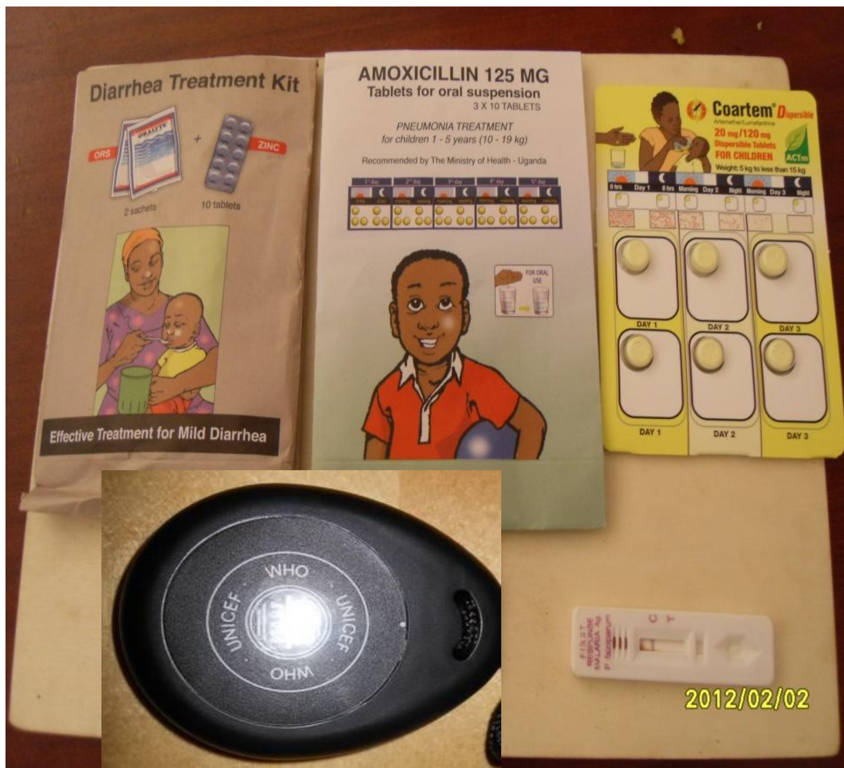
- 6.9 million children under 5 years of age die every year
- 60% of these deaths caused by malaria, pneumonia and diarrhoea
- Malaria, pneumonia and diarrhoea all manifest as acute febrile illness with overlapping symptoms
- Traditional treatment – presumptive antimalarials



Symptom overlap of sick children in Ugandan Health centers (Kallander et al 2004)

From Home Management of Malaria
to
Integrated Community Case Management of Malaria, Pneumonia and Diarrhoea (iCCM)

iCCM Tool kit



- 2002 – 2009 Home Based Management of Fever strategy in Uganda
  - Antimalarials only
- 2010 iCCM policy
  - WHO/UNICEF recommendation
- Scale up through Community Health Workers (CHWs) across Africa

Problem Statement

- iCCM is promoted through Public sector, yet
  - 2/3 febrile children in Uganda treated by private sector, especially drug shops
  - Quality of care is poor and drug use irrational
  - AMFm while popular overuses ACT and disregards other causes of fever than malaria

Objective

Determine feasibility and effectiveness of diagnostics and pre-packed drugs

for

malaria, pneumonia and diarrhoea

in

registered drug shops in Eastern Uganda

Methods

Quasi Experimental Design

Intervention district:
N = 44 drug shops
iCCM

1. Subsidized pre-packed drugs
2. Free Diagnostics
3. Training
4. Social Marketing

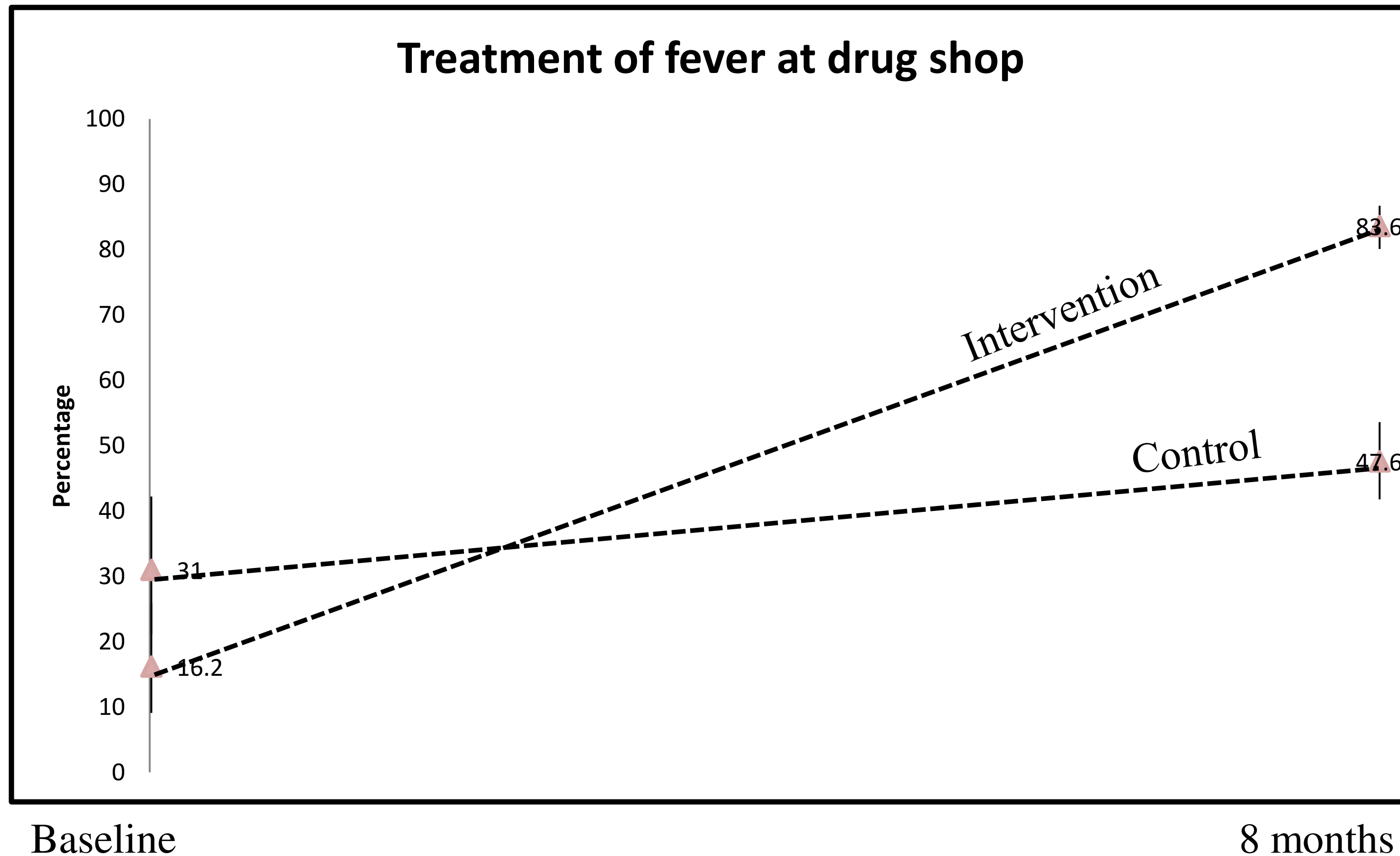
Comparison district:
N = 40 drug shops
Standard AMFm

1. Presumptive treatment of fever with ACT

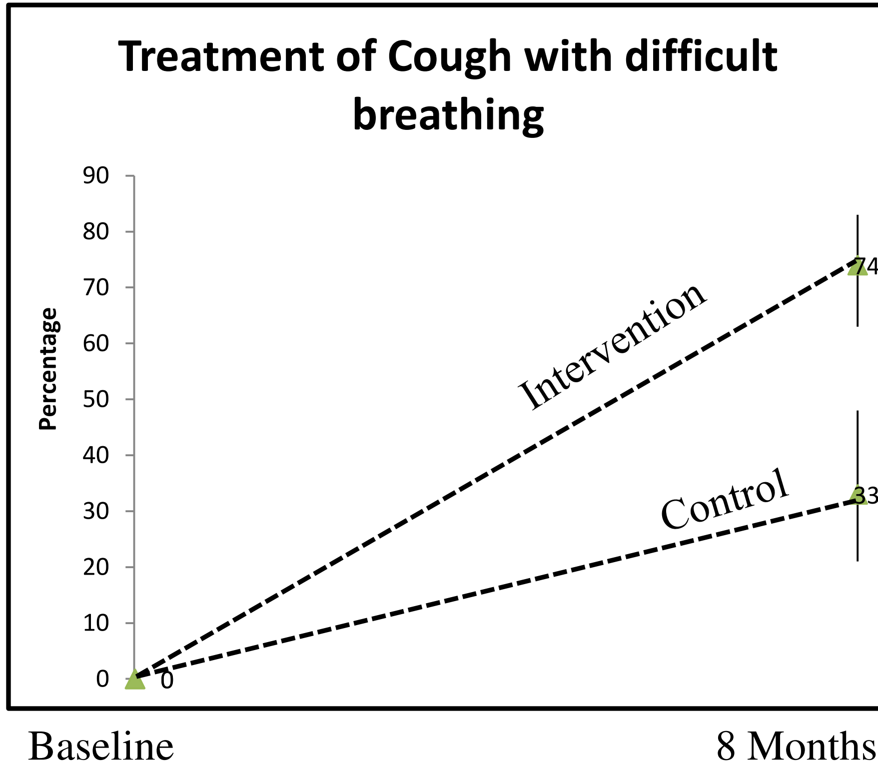
Methods

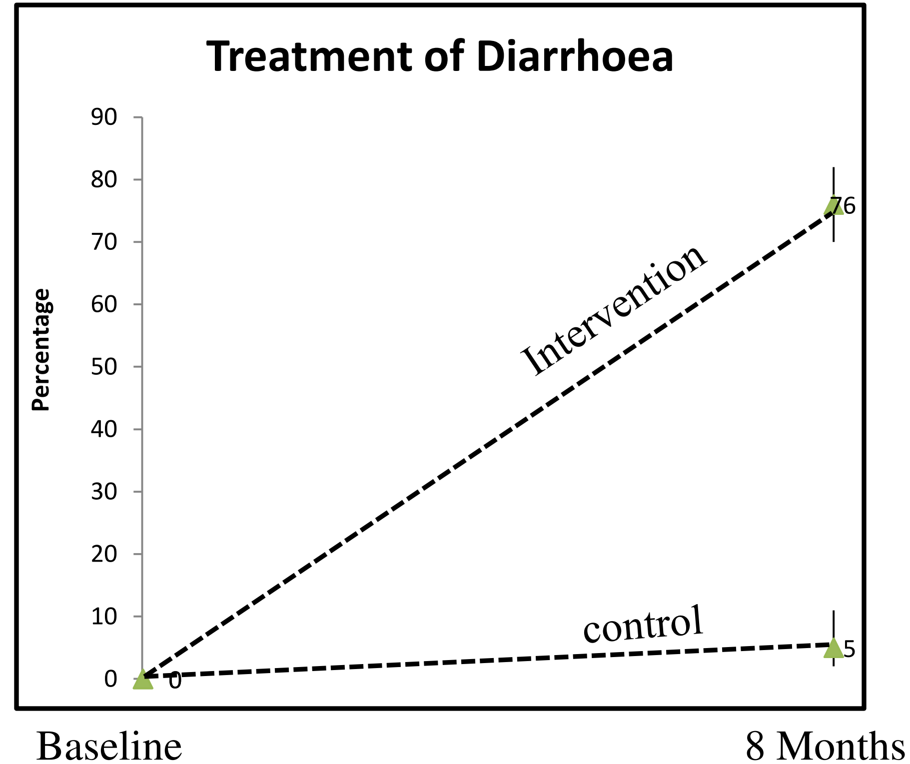
- Baseline - Endline Assessments
- 8 months duration (2011/12)
  - Exit interviews at drug shops (700)
  - Household surveys – care seeking and Rx practices (2140)
- Analysis
  - Correct treatment: drug, dose, duration
  - Sources of care

Correct treatment at Drug Shop –Exit Interviews

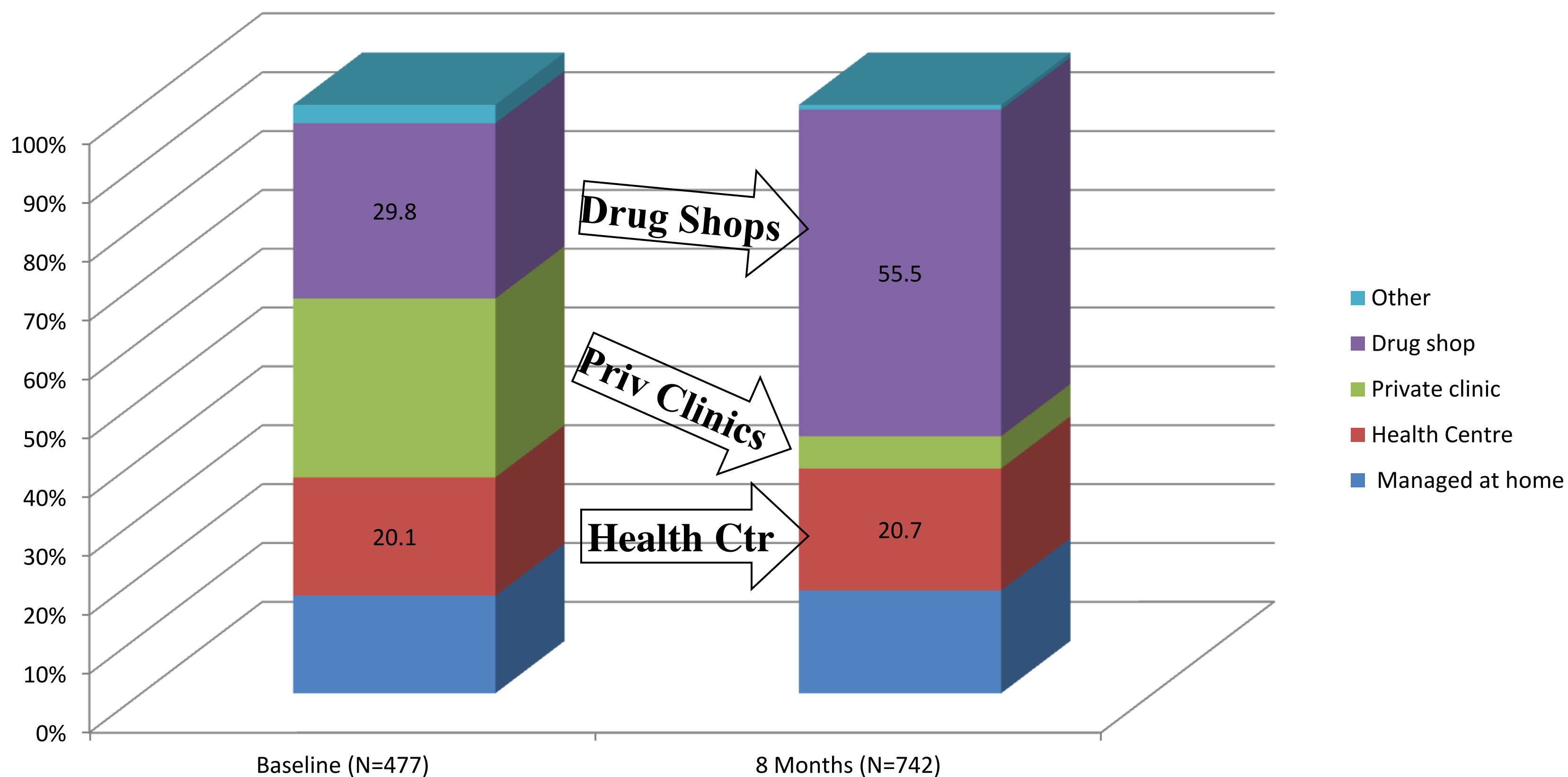


Correct Treatment at the Drug Shop – From Exit Interviews





Care seeking – Household Survey



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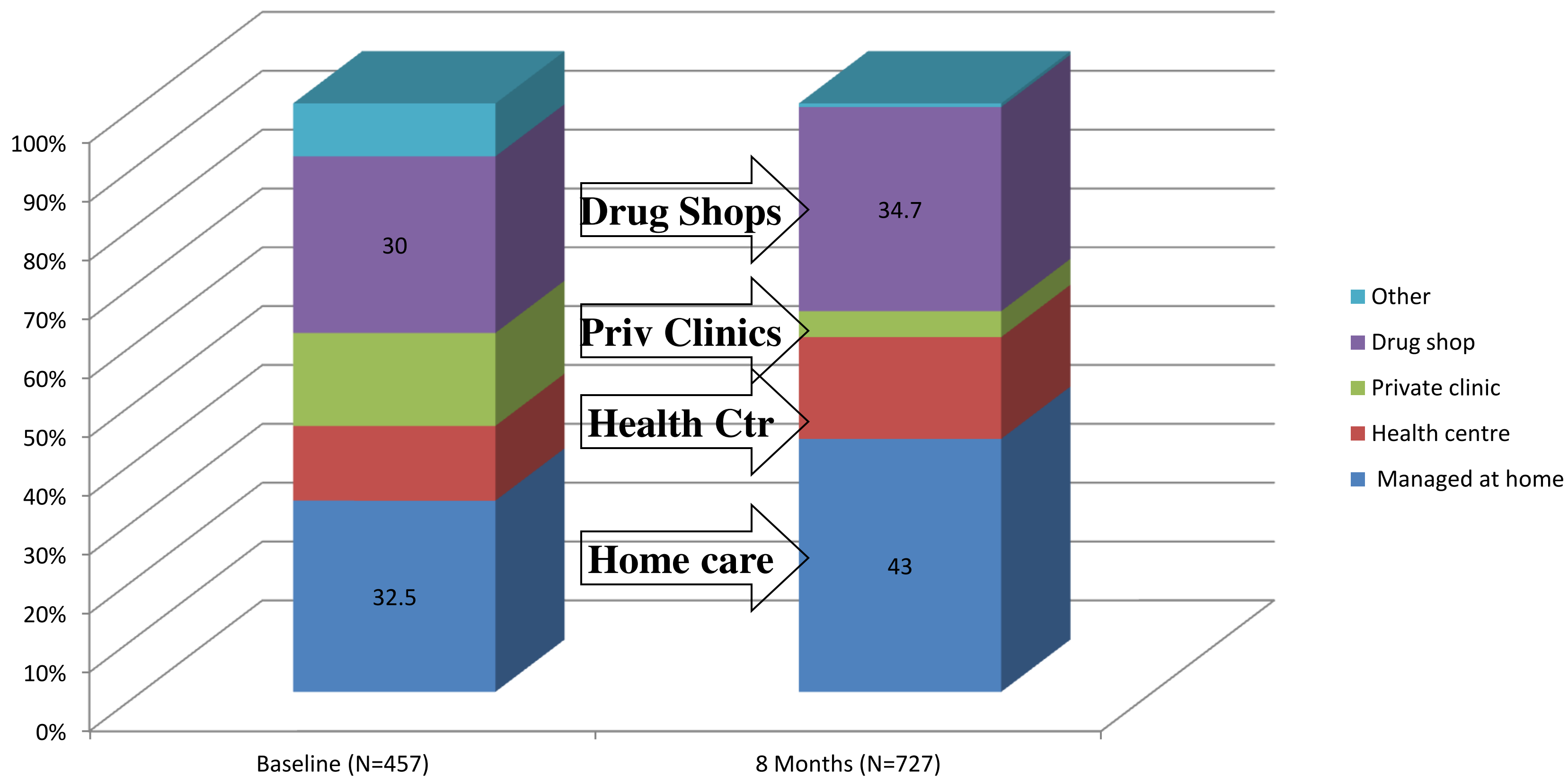

Conclusions

- Parents willing to bring children to drug shops
- Improved quality of care at drug shops
- AMFm can be extended to integrate management of malaria, pneumonia and diarrhea
- Adherence to RDT results may require alternative appropriate treatments

Acknowledgements

- Einhorn Family Foundation, Sweden
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