



2024 Annual ARV Buyer Seller Summit - What's Next?

Sunday, 17 November 2024 to Wednesday, 20 November 2024

Objective: To engage with industry on improving future demand visibility and working to improve the way buyers and sellers interact and work together to improve performance and efficiency.

TIME	TOPIC	SPEAKERS/MODERATORS	Location
Sunday, November 17, 2024			
10:00 to 18:00	One on One Sessions		Breakout Rooms
16:00 to 19:00	Registration		Foyer

TIME	TOPIC	SPEAKERS/MODERATORS	Location
Monday, November 18, 2024			
7:30 to 8:30	Registration		Foyer
8:30 to 8:45	Welcome Remarks	Ms. Hui C. Yang, <i>Head of Supply Operations, The Global Fund to Fight AIDS, Tuberculosis and Malaria</i> Ms. Khadija Jamaloodien, <i>Chief Director, Sector Wide Procurement, National Department of Health, Republic of South Africa</i> Mr. James Maloney, <i>Senior Advisor, Bureau of Global Health Security and Diplomacy, U.S. Department of State</i>	Almasi Ballroom 1 & 2
8:45 to 9:05	Global picture of HIV epidemic and scale of ARV usage (M1)	Ms. Khadija Jamaloodien , <i>Chief Director, Sector Wide Procurement, National Department of Health, Republic of South Africa</i>	Almasi Ballroom 1 & 2
9:05 to 9:45	Keynote Speaker	Honorable Hassan Khamis Hafidh, <i>Deputy Minister of Health, Zanzibar</i> Mr. Craig Hart, <i>USAID Mission Director, USAID Tanzania</i> Madame Jenista Mhagama, <i>Minister of Health, United Republic of Tanzania</i>	Almasi Ballroom 1 & 2

TIME	TOPIC	SPEAKERS/MODERATORS	Location
9:45 to 10:30	Republic of Tanzania Matters (M2)	Mr. Daudi Msasi, <i>Chief Pharmacist, Government of Tanzania</i> Mr. Mavere Tukai, <i>Director General, Tanzania Medical Store Department</i> Mr. Adonis Bitegeko, <i>Manager, Tanzania Medicines & Medical Devices Authority Eastern Zone</i> Dr. Prosper Faustine, <i>Program Manager, United Republic of Tanzania National AIDS, STIs & Hepatitis Control Programme (NASHCOP)</i> Moderated by Mr. Cherif Cisse, <i>Sr. Supply Chain Management Advisor, USAID/Tanzania</i>	Almasi Ballroom 1 & 2
Coffee and Tea Break from 10:40 to 11:00			Foyer
11:00 to 11:20	18 Month Consolidated Forecast (M3)	Mr. Shanil Ramlall , <i>Consultant supporting South Africa NDoH - Supply and Transitional Projects</i>	Almasi Ballroom 1 & 2
11:20 to 12:05	Highlights by Procurement Channel with Q&A (M4)	Mr. Viktor Cherniavskiy, <i>Procurement and Contracts Analyst, UNDP</i> Mr. Allan Gakwandi, <i>Transforming Rwanda Medical Supply Chain (TRMS) Project Director, Rwanda Medical Supply Ltd.</i> Dr. Evans Imbuki, <i>Program Manager, HIV Health Products and Technologies, Kenya</i> Ms. Victoria Nakiganda Lubega, <i>Program Management Specialist - Supply Chain, USAID/Uganda</i> Moderated by Mr. Josh Rosenfeld, <i>Senior Supply Chain Advisor, Office of HIV/AIDS, USAID/Washington</i>	Almasi Ballroom 1 & 2

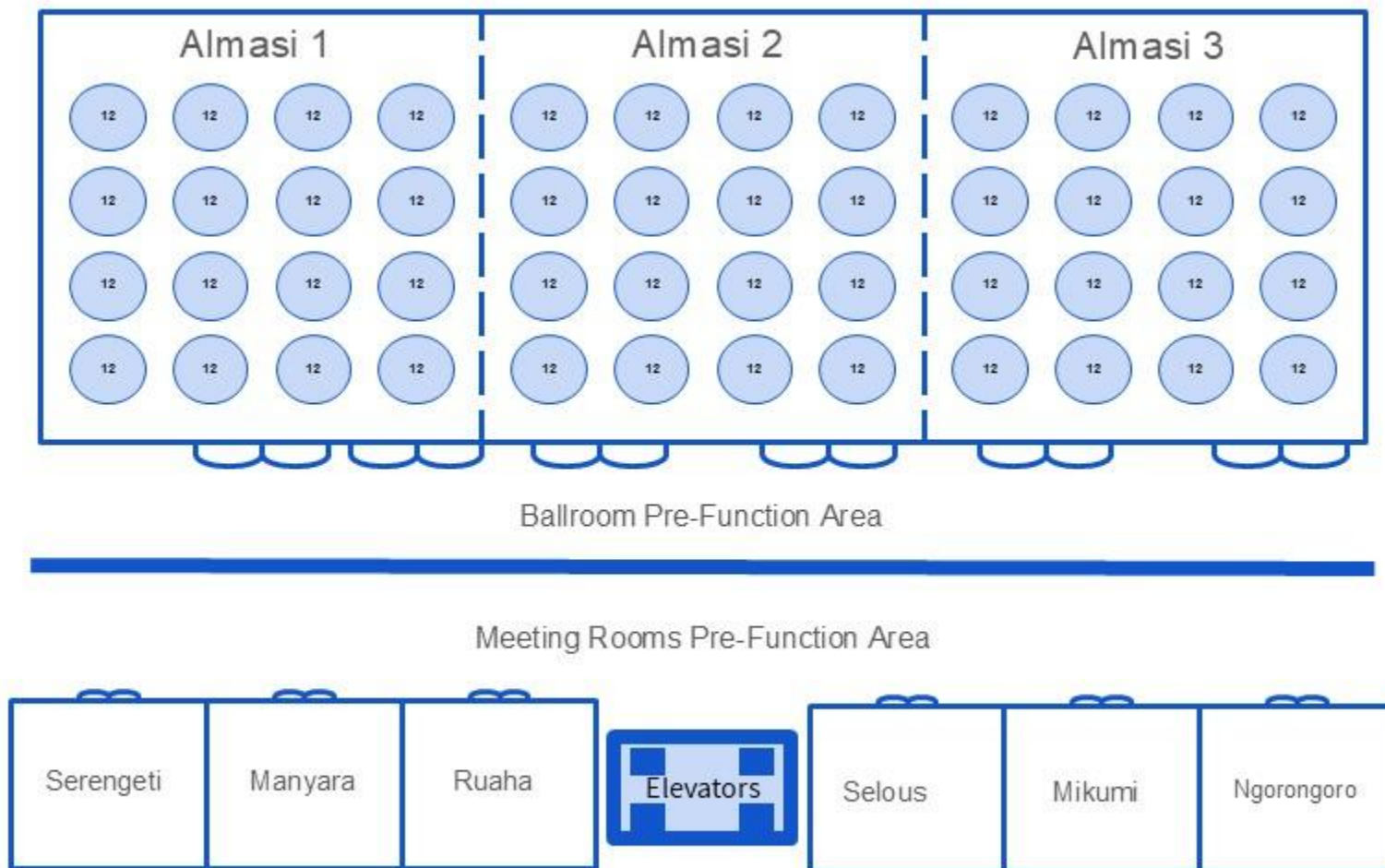
TIME	TOPIC	SPEAKERS/MODERATORS	Location
12:05 to 12:30	Traceability Data Exchange: The Next Step in Global Standards Implementation (M5)	Ms. Tarang Verma, <i>Assistant General Manager, Hetero Labs Limited</i> Mr. Chaitanya Prakash, <i>Deputy General Manager, Aurobindo Pharma</i> Ms. Kaitlyn Roche, <i>Traceability Team Lead, Global Health Supply Chain - Procurement & Supply Management</i> Moderated by Ms. Lindabeth Doby, <i>Senior Digital Supply Chain Advisor, Office of HIV/AIDS, USAID Washington</i>	Almasi Ballroom 1 & 2
Lunch from 12:30 to 14:00			Zafarani
12:30 to 18:00	One on One Sessions		Breakout Rooms
Coffee and Tea Break from 15:00 to 17:00			Foyer
Tuesday, November 19, 2024			
8:30 to 9:15	Highlights by Procurement Channel with Q&A (T1)	Mr. Alan Pringle, <i>Global Supply Chain Director, GHSC-PSM/Chemonics</i> Ms. Babalwa Melitafa, <i>Deputy Director, Contract Management Unit, National Department of Health, Republic of South Africa</i> Mr. Cathal Meere, <i>Pharma Sourcing Manager, The Global Fund to Fight AIDS, Tuberculosis and Malaria</i> Moderated by Mr. Daniel Kiesa, <i>Senior Market Intelligence Adviser, Office of HIV/AIDS, USAID Washington</i>	Almasi Ballroom 1 & 2
9:15 to 10:10	What's next for PrEP? (T2)	Mr. Boniface Nguimfack, <i>Technical Lead Access to Medicines and Diagnostics Services, WHO</i> Ms. Emily Doward, <i>Chief, Biomedical Prevention Branch, Office of HIV/AIDS, USAID Washington</i>	Almasi Ballroom 1 & 2

TIME	TOPIC	SPEAKERS/MODERATORS	Location
		Mr. Shaun McGovern, Advisor, HIV Product Introduction, The Global Fund to Fight AIDS, Tuberculosis and Malaria Ms. Sandra Nobre, Head of Business Development, Medicines Patent Pool Ms. Marione Schonfeldt, Senior Pharmaceutical Policy Specialist, Affordable Medicines Directorate, Republic of South Africa Mr. Simo Masondo, Vice President Government Affairs & Trade Development, Cipla Pharmaceuticals Moderated by Mr. Steve Wynn, Chief, Supply Chain Management Branch, Office of HIV/AIDS, USAID/Washington	
Coffee and Tea Break from 10:10 to 10:30			Foyer
10:30 to 11:55	What's next for Treatment and PNP? (T3)	Mr. Boniface Nguimfack, Technical Lead, Access to Medicines and Diagnostics Services, World Health Organization Mr. Shaun McGovern, Advisor, HIV Product Introduction, The Global Fund to Fight AIDS, Tuberculosis and Malaria Mr. Arvind Kanda, Head Commercial-ARV API-SSA, SA, Mylan Laboratories Limited - A Viatris Company Ms. Khadija Jamaloodien, Chief Director, Sector Wide Procurement, National Department of Health, Republic of South Africa Dr. Boniface Silvan Mlay, Head of Care and Treatment, NASHCOP, Tanzania Dr. Christine Malati, Senior Pharmacist, USAID/Washington, Office of HIV/AIDS Moderated by Mr. Cathal Meere, Pharma Sourcing Manager, The Global Fund to Fight AIDS, Tuberculosis and Malaria	Almasi Ballroom 1 & 2

TIME	TOPIC	SPEAKERS/MODERATORS	Location
11:55 to 12:40	African Production (T4)	Dr. Dianna Edgil, <i>Acting, Deputy Office Director, Office of HIV/AIDS, USAID/ Washington</i> Ms. Khadija Jamaloodien, <i>Chief Director, Sector Wide Procurement, National Department of Health, Republic of South Africa</i> Mr. Jens Windahl Pedersen, <i>Senior Advisor, Africa CDC</i> Dr. Perrerr Tosso, <i>Director, Pharmaceutical Manufacturing Programs, United States Pharmacopeia</i> Ms. Faith Mangwanya, <i>Programme Officer, Unitaid</i> Moderated by Clarisse Morris, <i>Manager, Market Shaping and Partnerships Strategy, Procedure, Innovation, Supply Operations, The Global Fund to Fight AIDS, Tuberculosis and Malaria</i>	Almasi Ballroom 1 & 2
12:40 to 13:00	Closing Remarks	Dr. Dianna Edgil, <i>Acting Deputy Office Director, Office of HIV/AIDS, USAID/ Washington</i> Ms. Khadija Jamaloodien, <i>Chief Director, Sector Wide Procurement, National Department of Health, Republic of South Africa</i> Mr. Lin (Roger) Li, <i>Senior Manager, Direct Sourcing Supply Operations, The Global Fund to Fight AIDS, Tuberculosis and Malaria</i>	Almasi Ballroom 1& 2
Lunch from 13:00 to 14:00			
13:00 to 18:00	One on One Sessions		Breakout Rooms
Coffee and Tea Break from 15:00 to 17:00			

TIME	TOPIC	SPEAKERS/MODERATORS	Location
Wednesday, November 20, 2024			
8:00 to 18:00	One on One Sessions		Breakout rooms
Coffee and Tea Break from 10:30 to 11:00			Foyer
Lunch from 12:00 to 14:00			Zafarani
Coffee and Tea Break from 15:00 to 15:30			Foyer

Meeting Room Layout



2024 ANNUAL ARV BUYER SELLER SUMMIT

18 MONTH CONSOLIDATED FORECAST

Nov 2024



Republic of South Africa

CAVEATS AND LIMITATIONS TO THE CURRENT FORECAST

- **Estimates** based on a combination of currently confirmed orders, firm demand & demand forecasts
- Prepared based on **data currently available** to the various buyers
- **Preliminary estimates for discussion and planning** – not final purchase commitments
- **May not yet fully capture lead times** between order placement at manufacturer and in-country delivery

TREATMENT FOR ADULT AND ADOLESCENTS

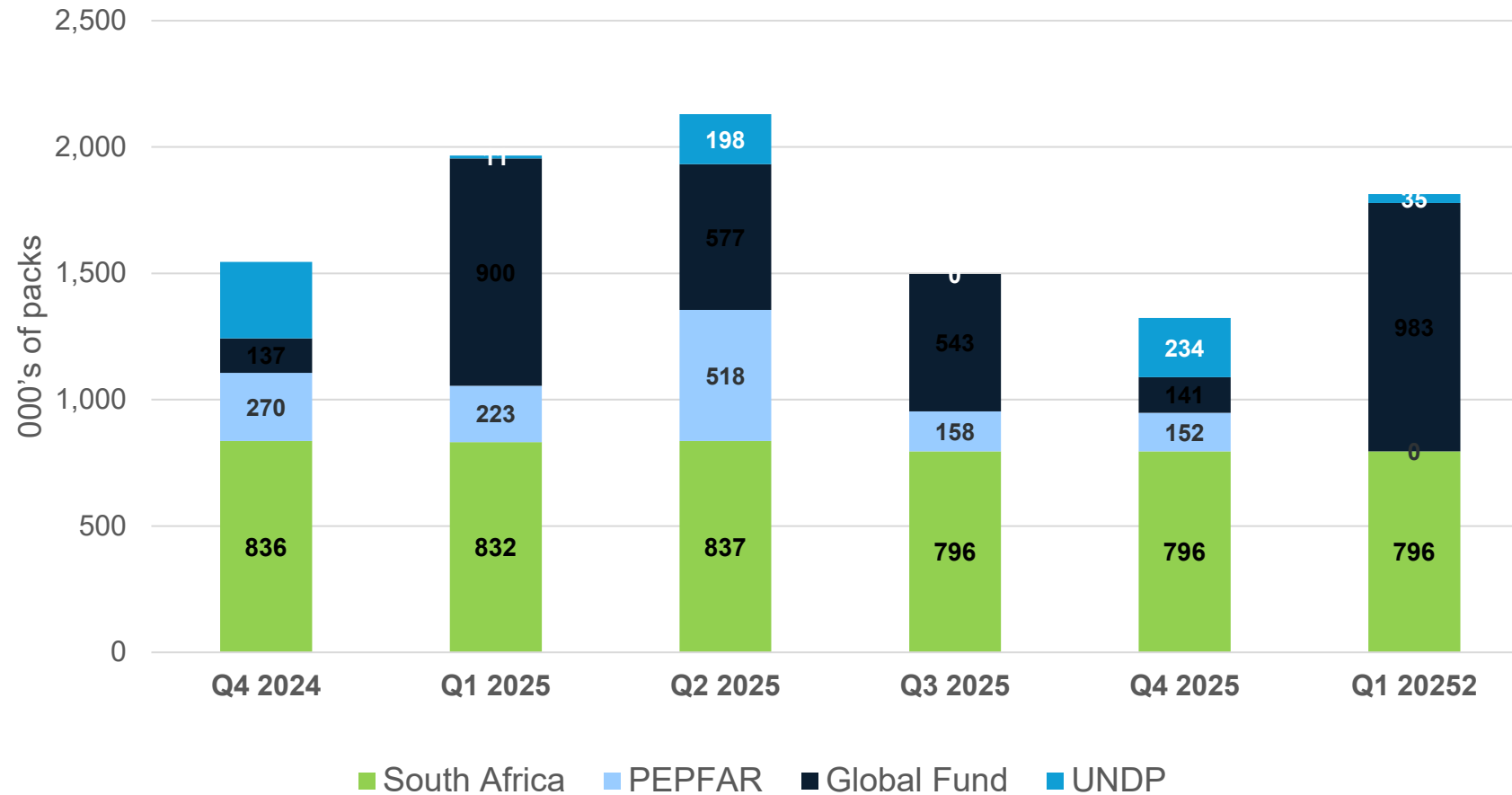
18 MONTH CONSOLIDATED FORECAST

Nov 2024



Republic of South Africa

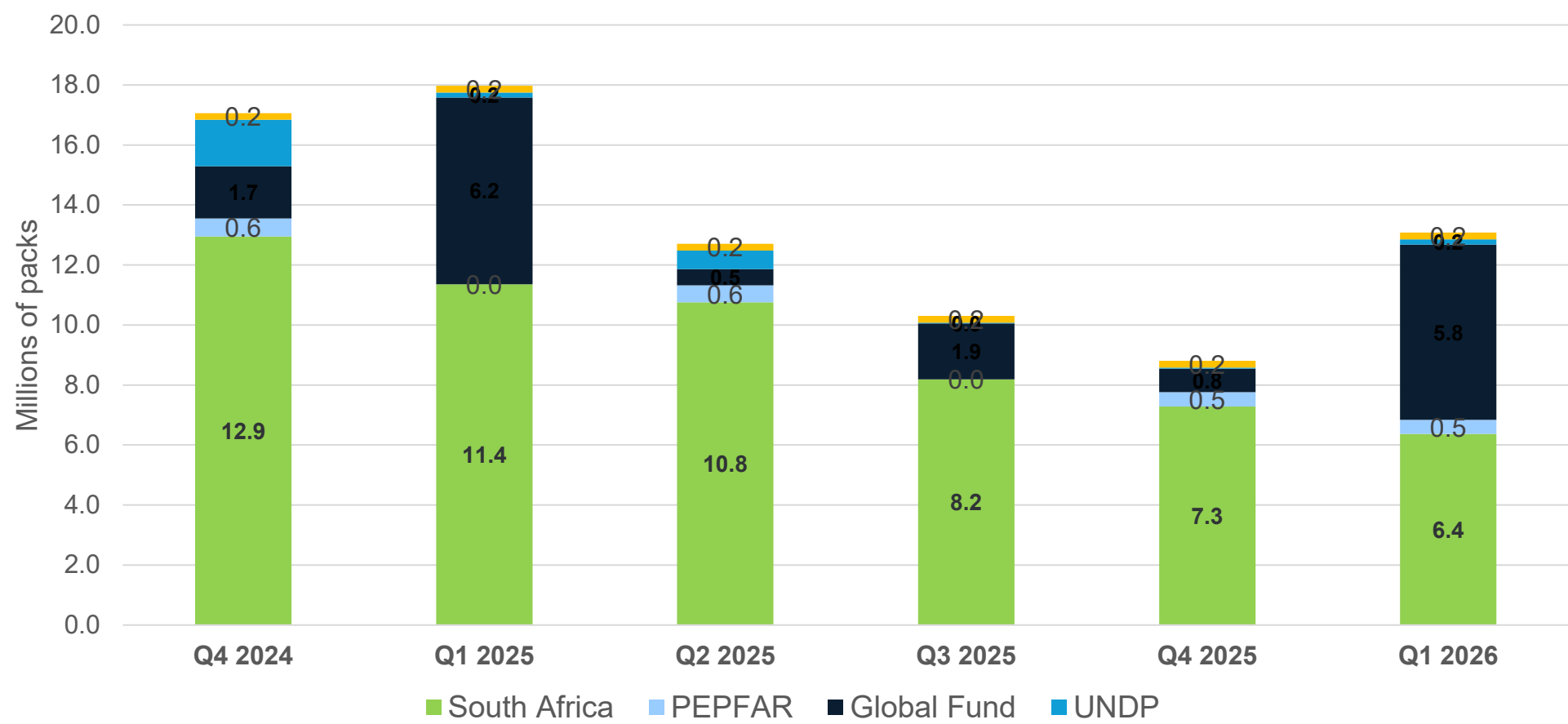
DTG 50 mg, 30 tablets



- Little or no demand expressed for 90's packs

Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

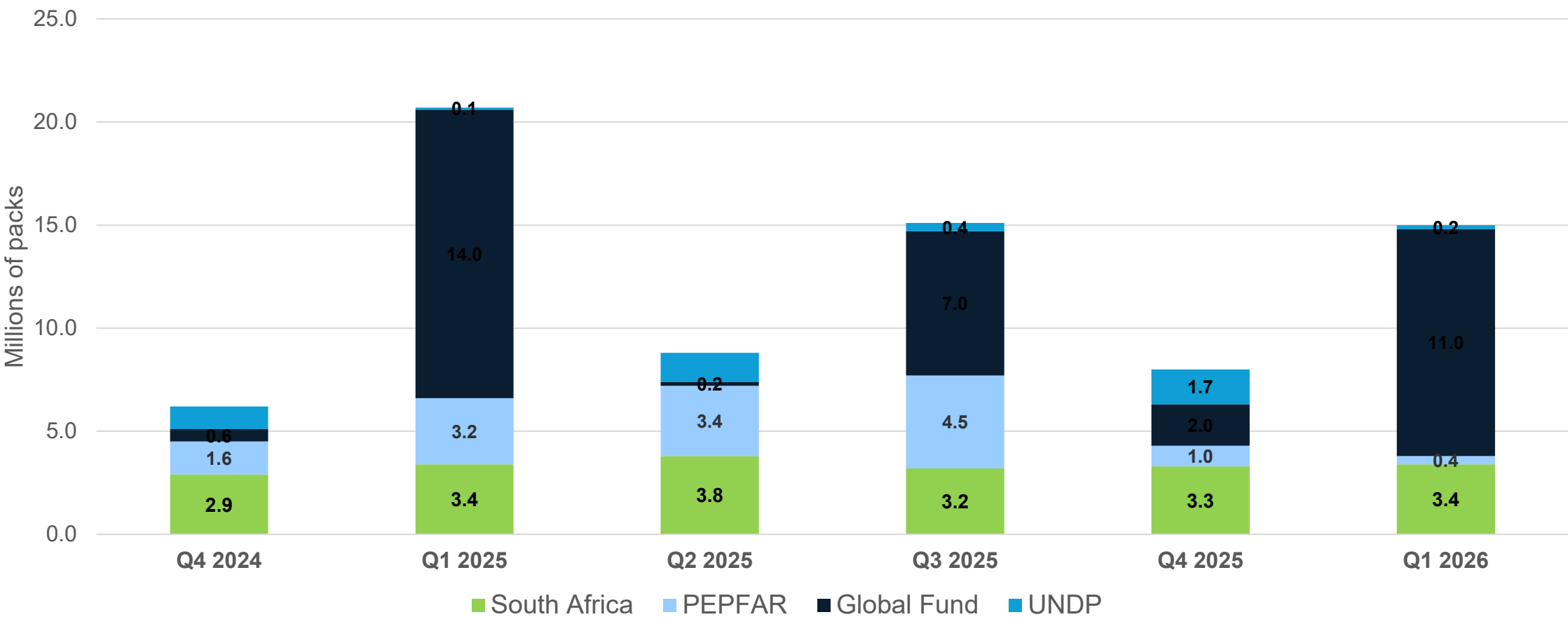
TLD 28-30 tablets; SOUTH AFRICA remains the main MARKET



- South Africa estimated usage of 28s reduces over the period due to increase usage of 84/90s

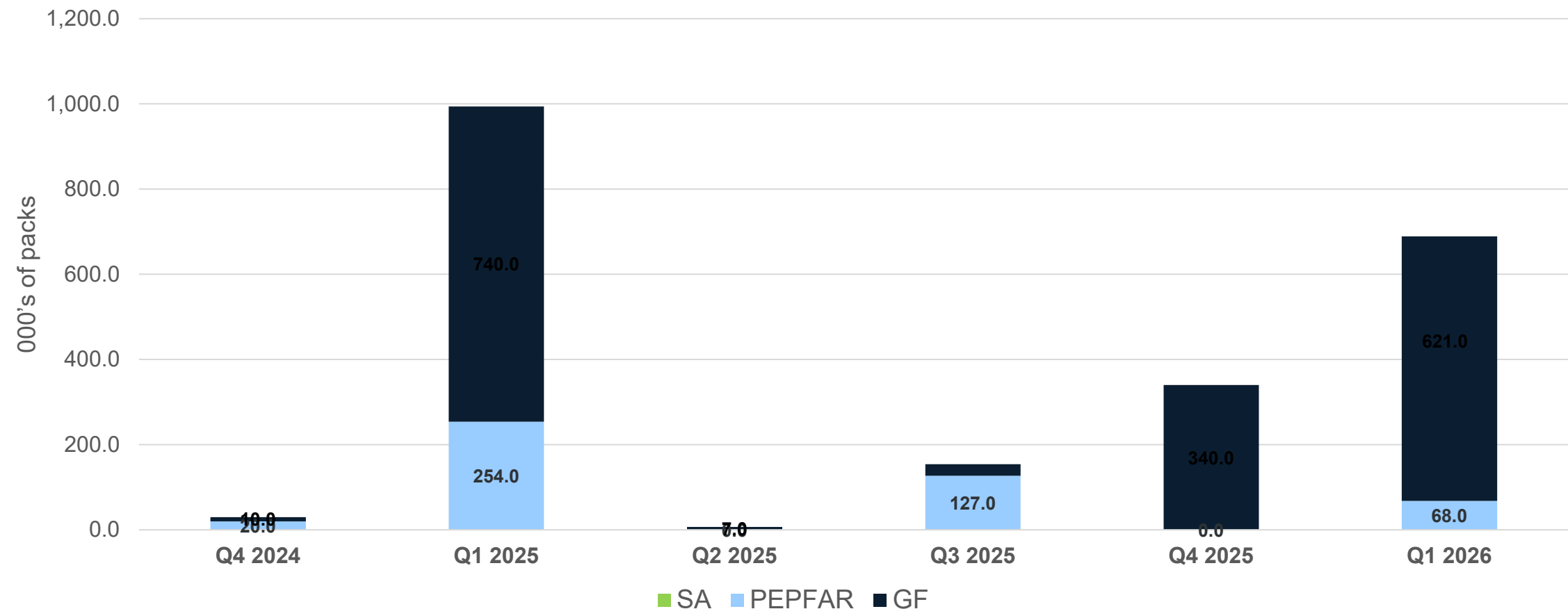
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP, Ethiopia

TLD 84-90 tablets; fluctuations per quarter



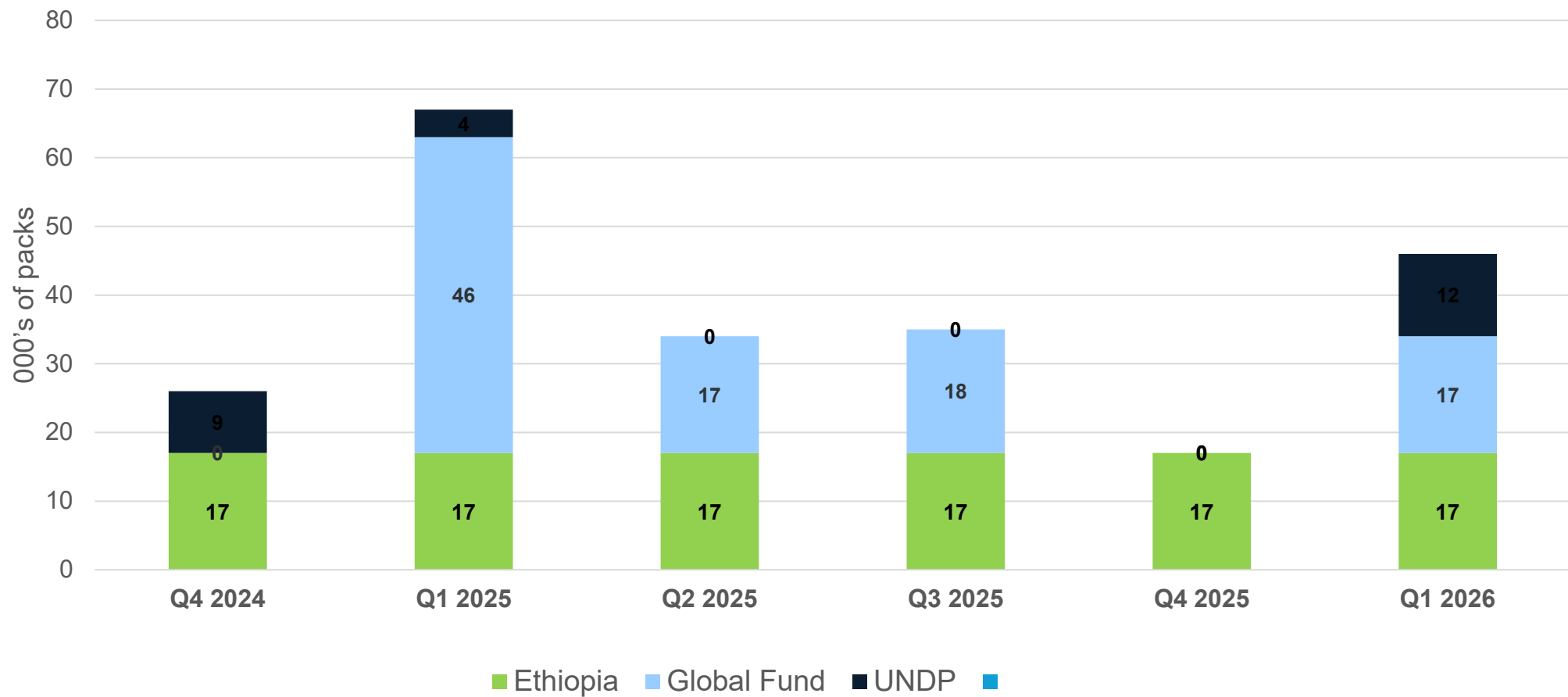
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP, Ethiopia

TLD 180 tablets; PEPFAR and Global Fund driving demand



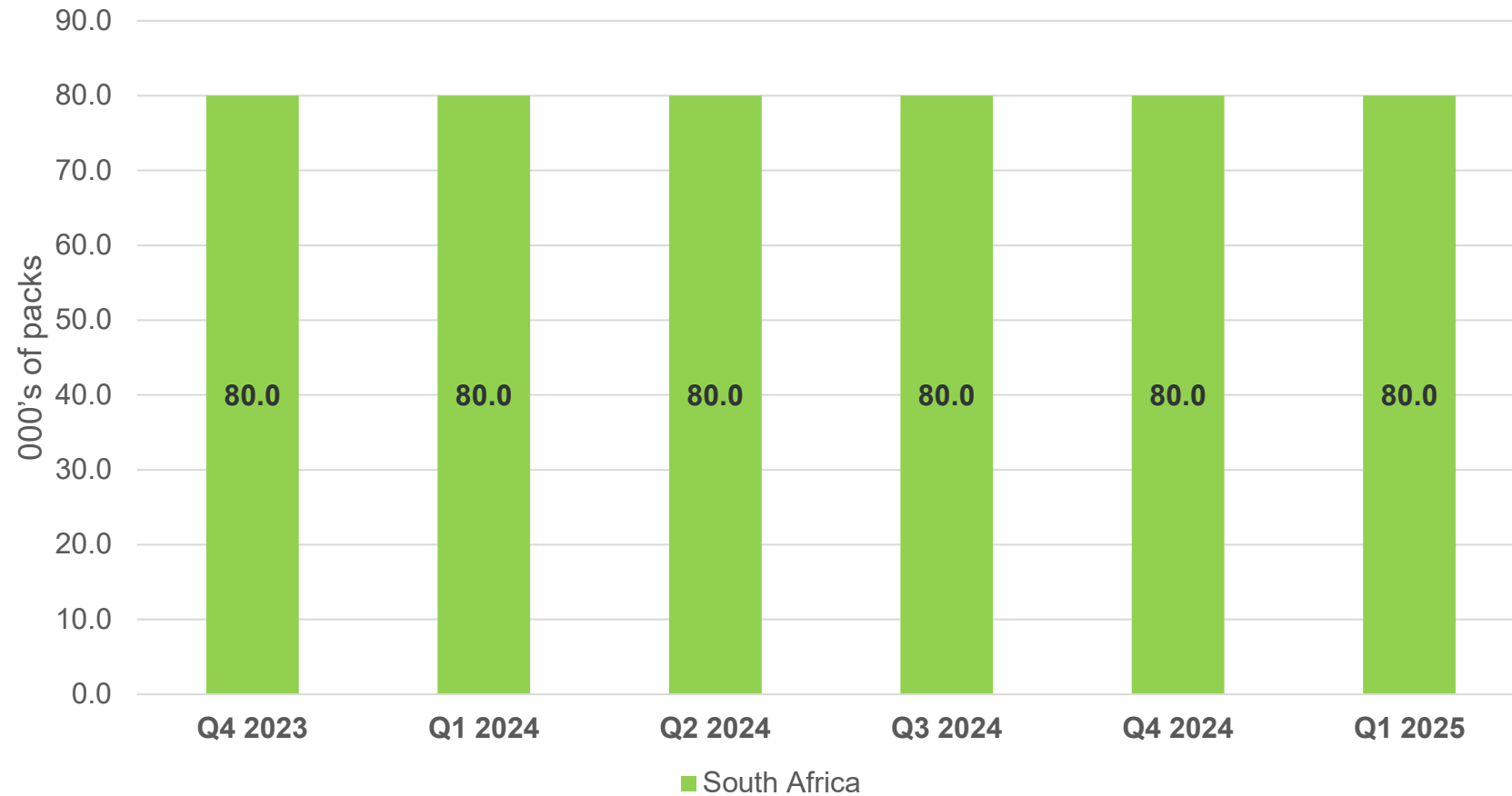
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

TLE 400 mg; GLOBAL FUND is the key purchaser



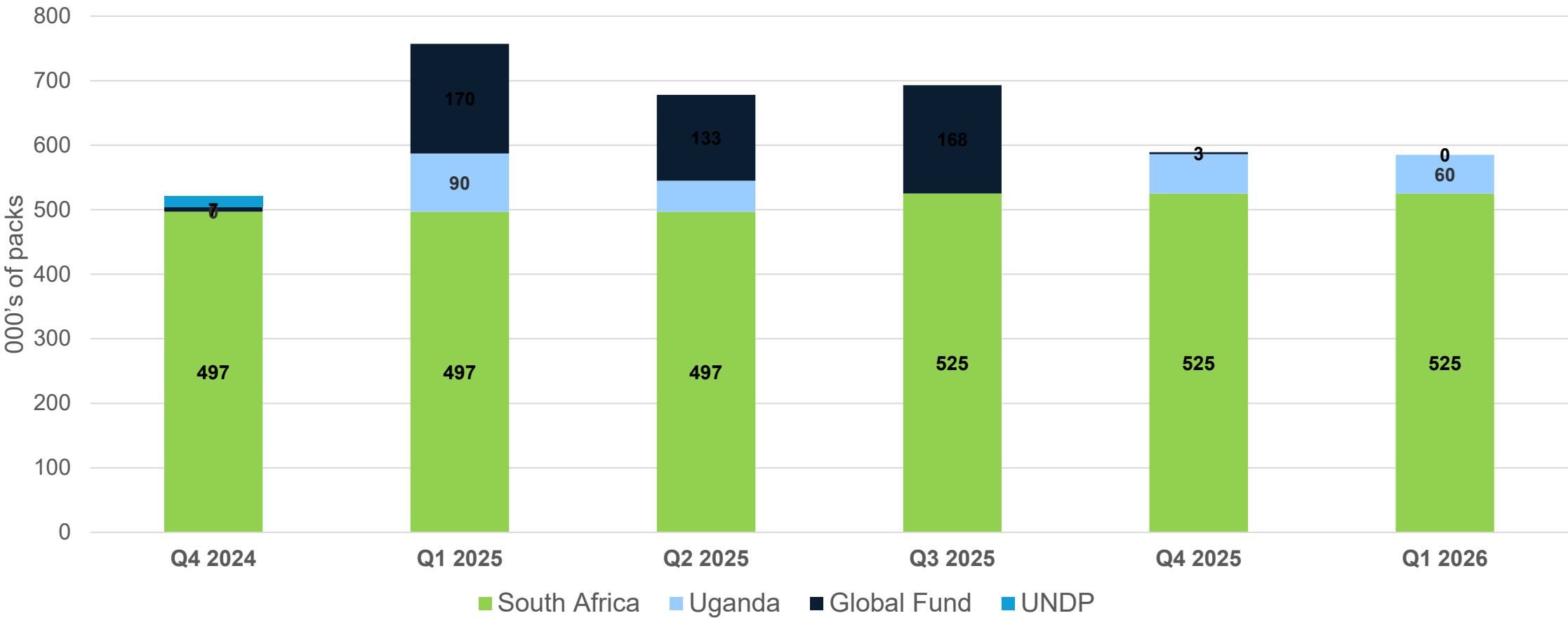
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

TEE, 28 tablets; SOUTH AFRICA is the main MARKET



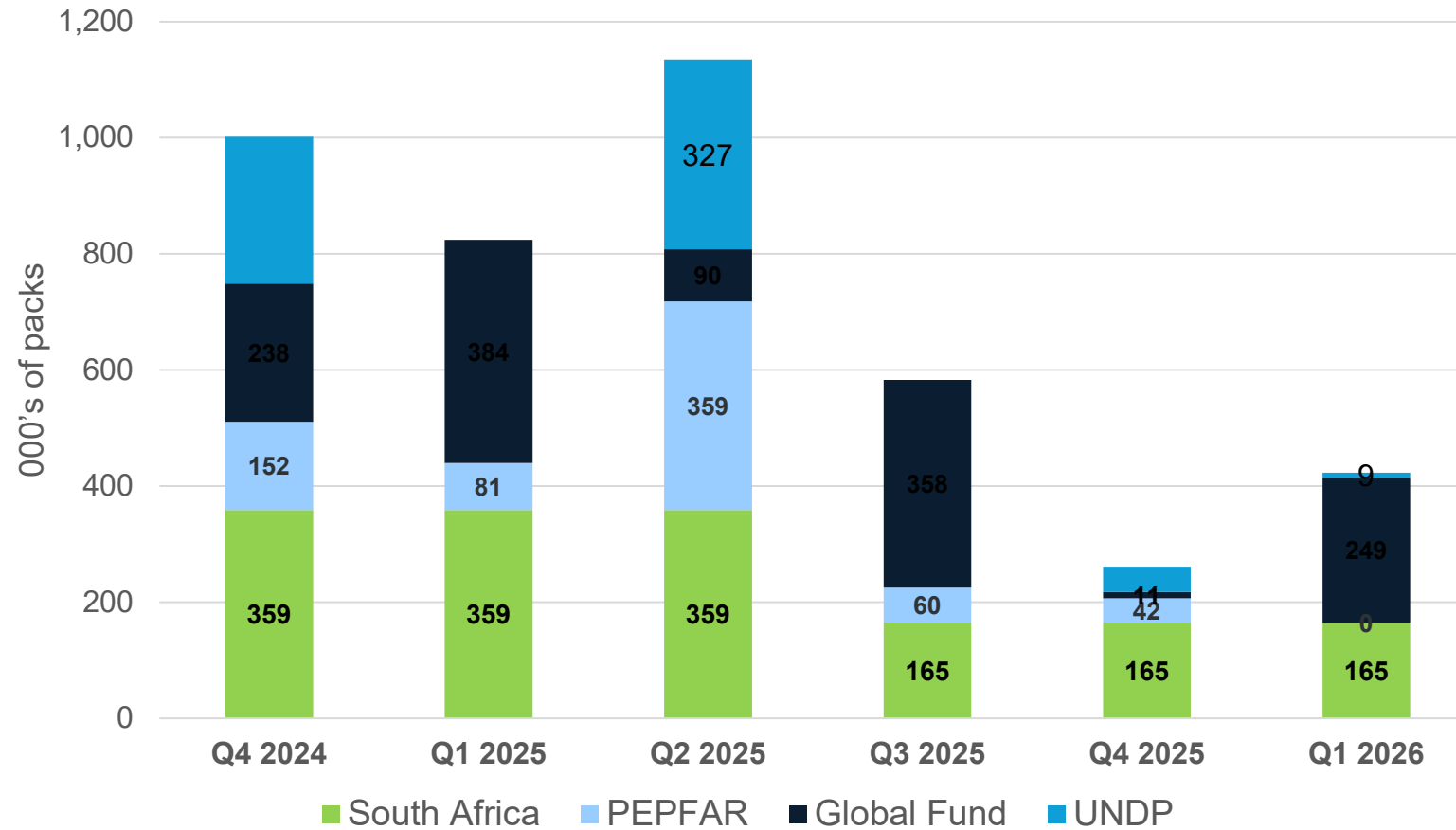
- TEE is ~1.5% of TROA as of June'24

ABC/3TC/DTG 600/300/50 mg, 30 tablets



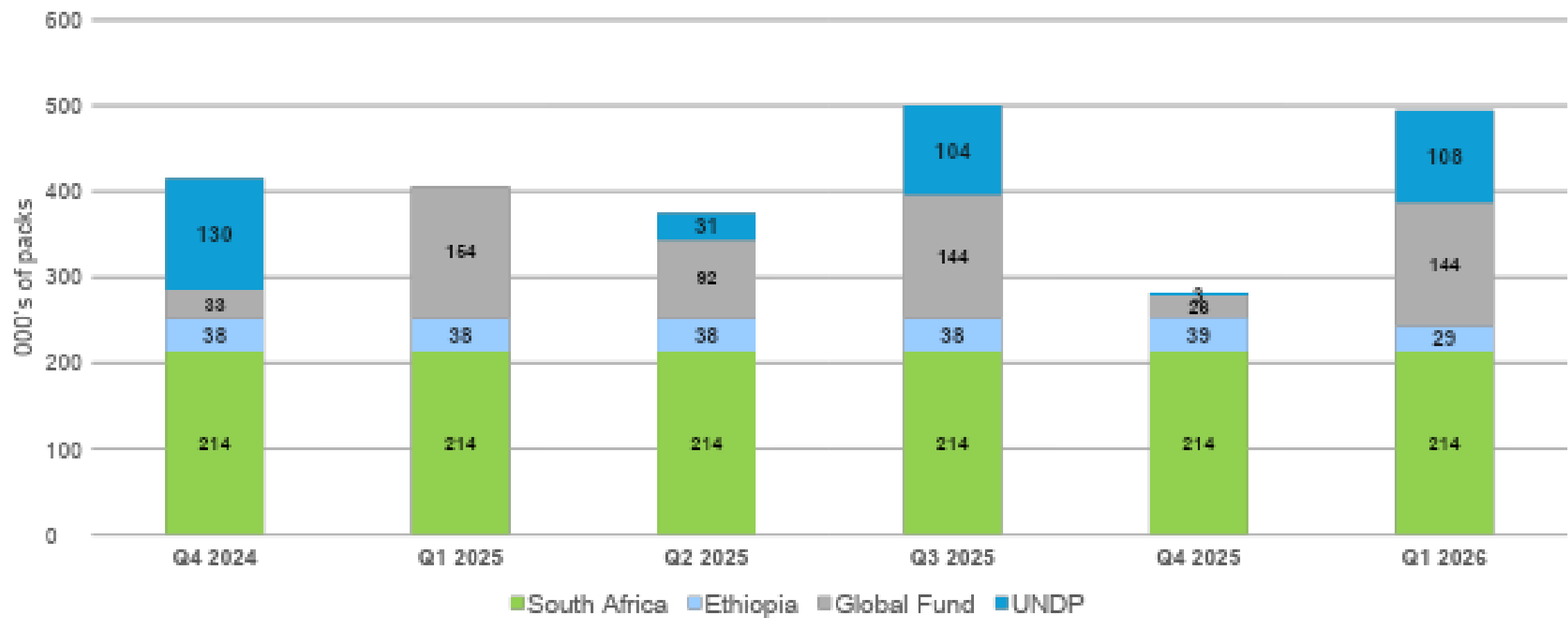
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

ABC/3TC 600/300 mg, 30 tablets



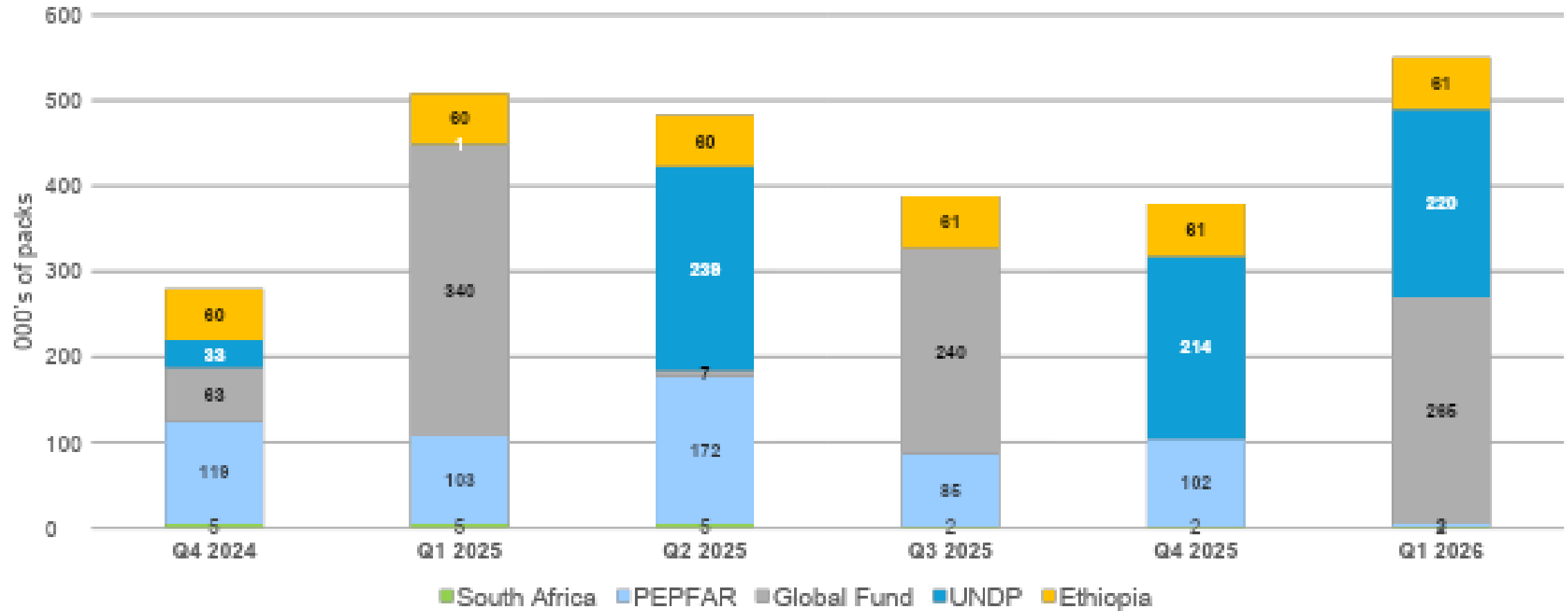
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

AZT/3TC 300/150 mg, 56-60 tablets



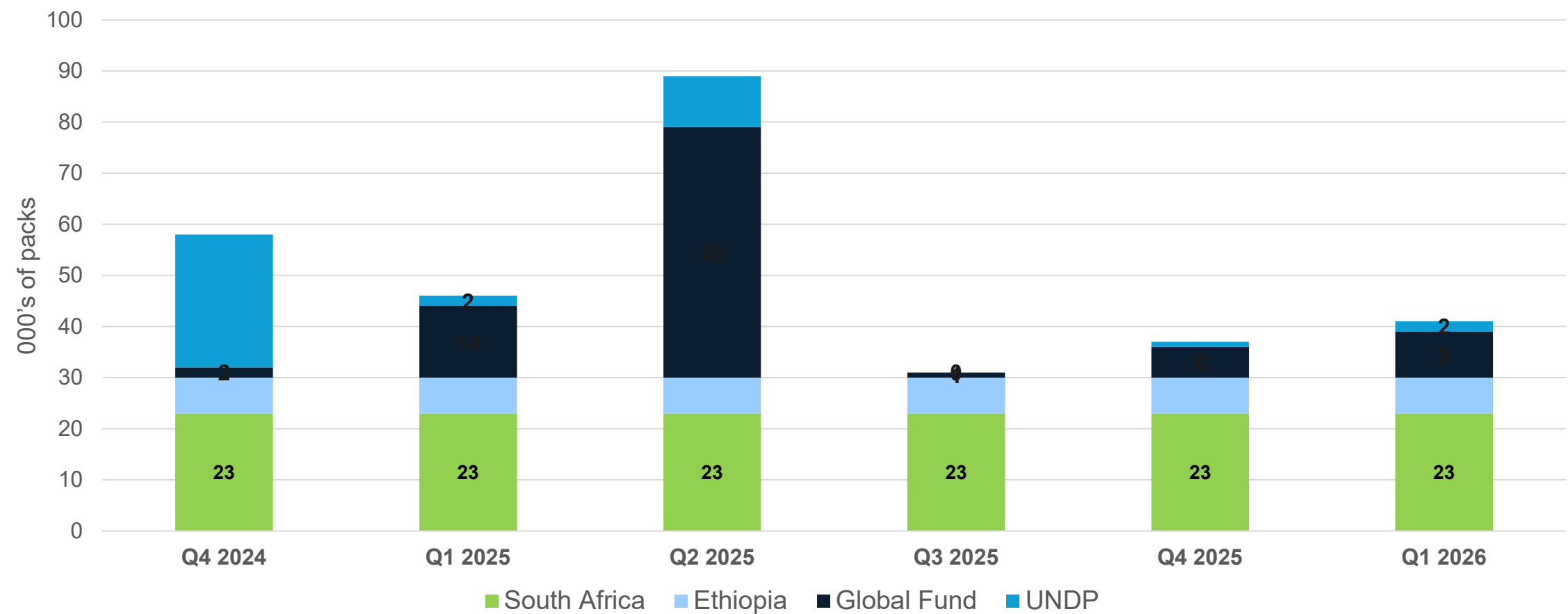
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

ATV/r 300/100 mg, 30 tablets



Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

LPV/r 200/50 mg, 112-120 tablets



Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

REGARDING DRV/r 400/100 mg, #60

USAID, GF, SOUTH AFRICA will send the forecast for DRVr through their respective channels, in due time.

18 MONTH CONSOLIDATED FORECAST

Nov 2024



Republic of South Africa

PREEXPOSURE PROPHYLAXIS (PrEP)*

***Also used in treatment**

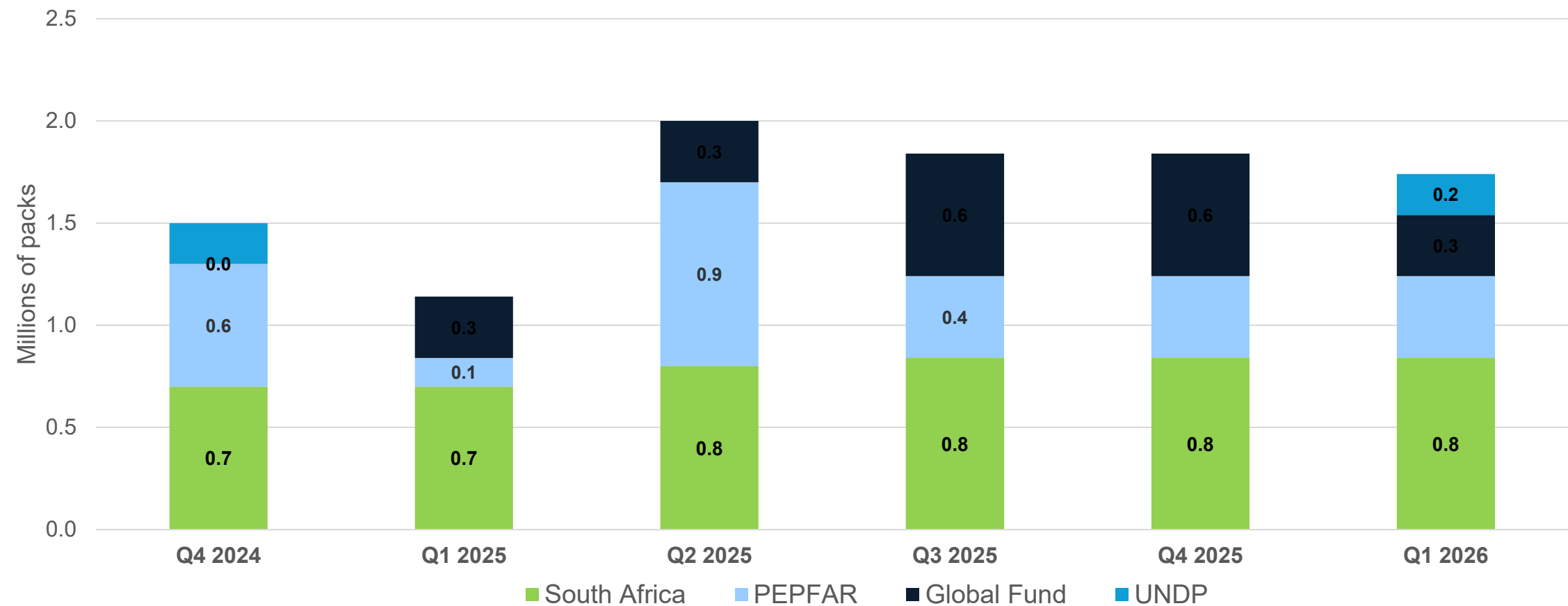
18 MONTH CONSOLIDATED FORECAST

Nov 2024



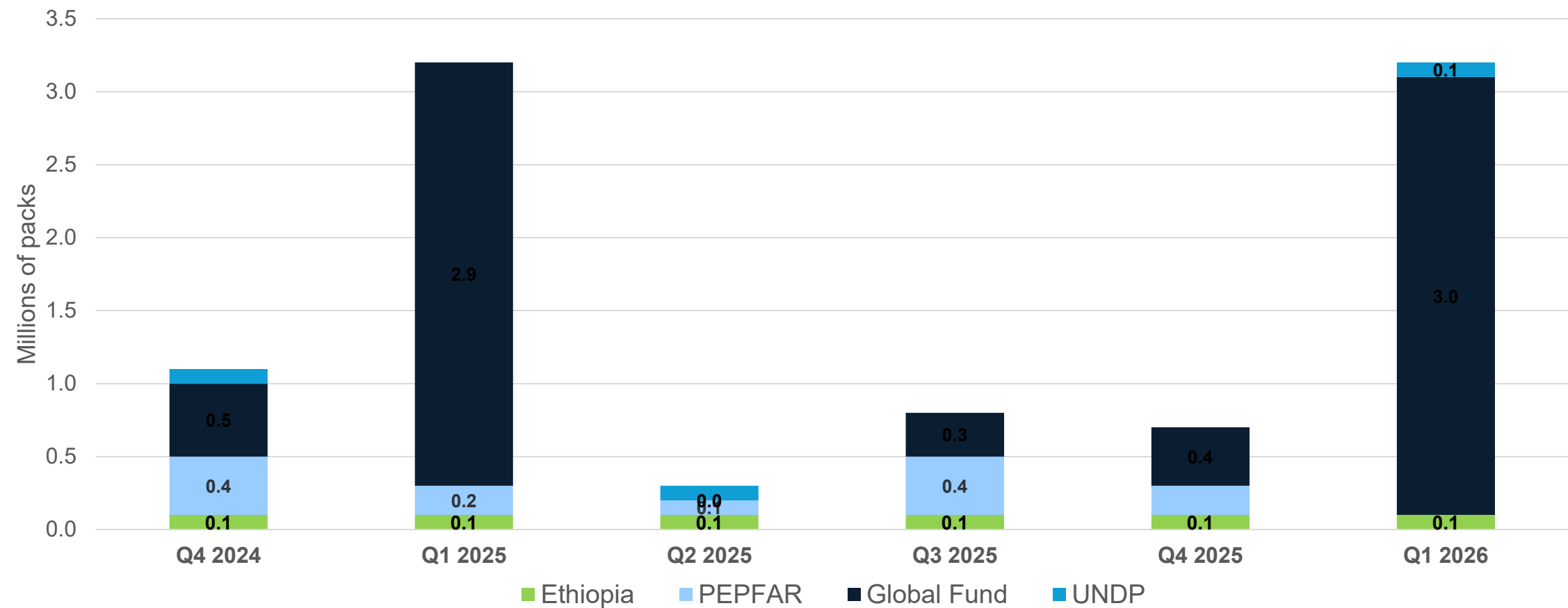
Republic of South Africa

TDF/FTC 300/200 mg, 30 tablets



Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

TDF/3TC 300/300 mg, 30 tablets



Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

TREATMENT FOR INFANTS AND CHILDREN

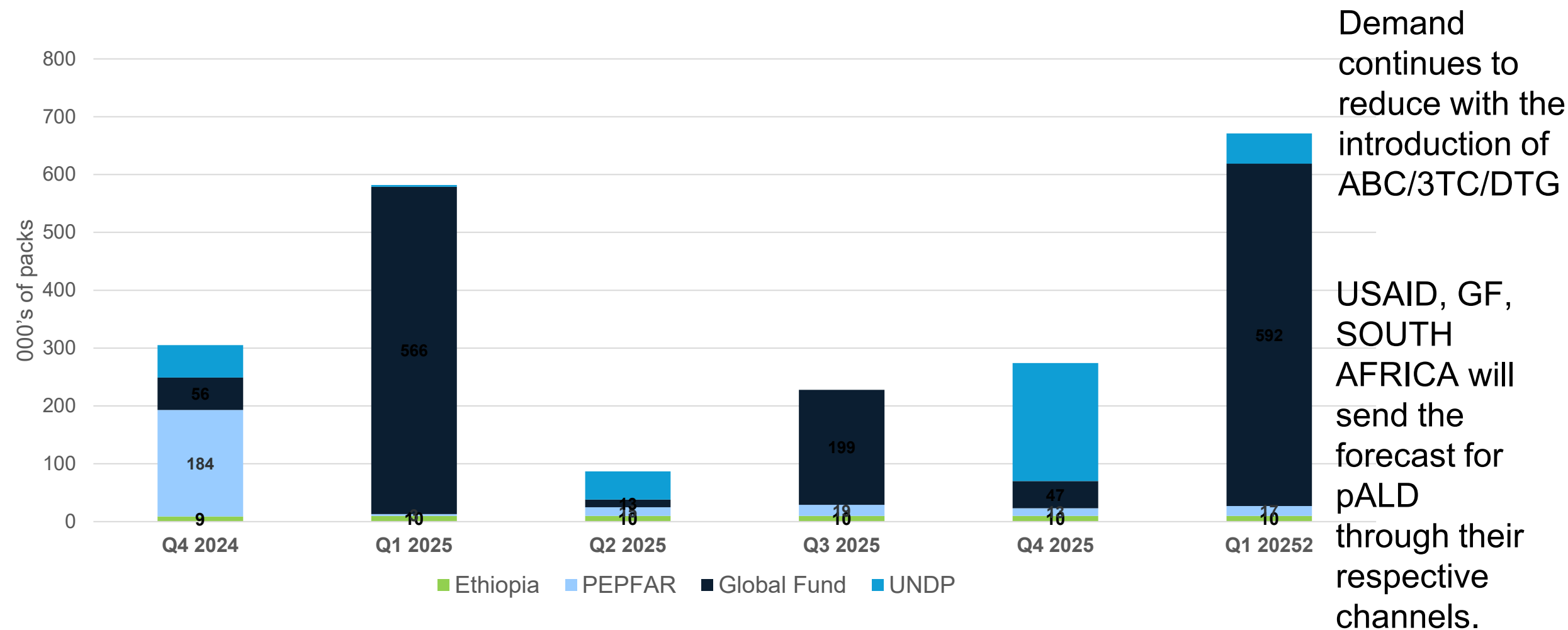
18 MONTH CONSOLIDATED FORECAST

Nov 2024



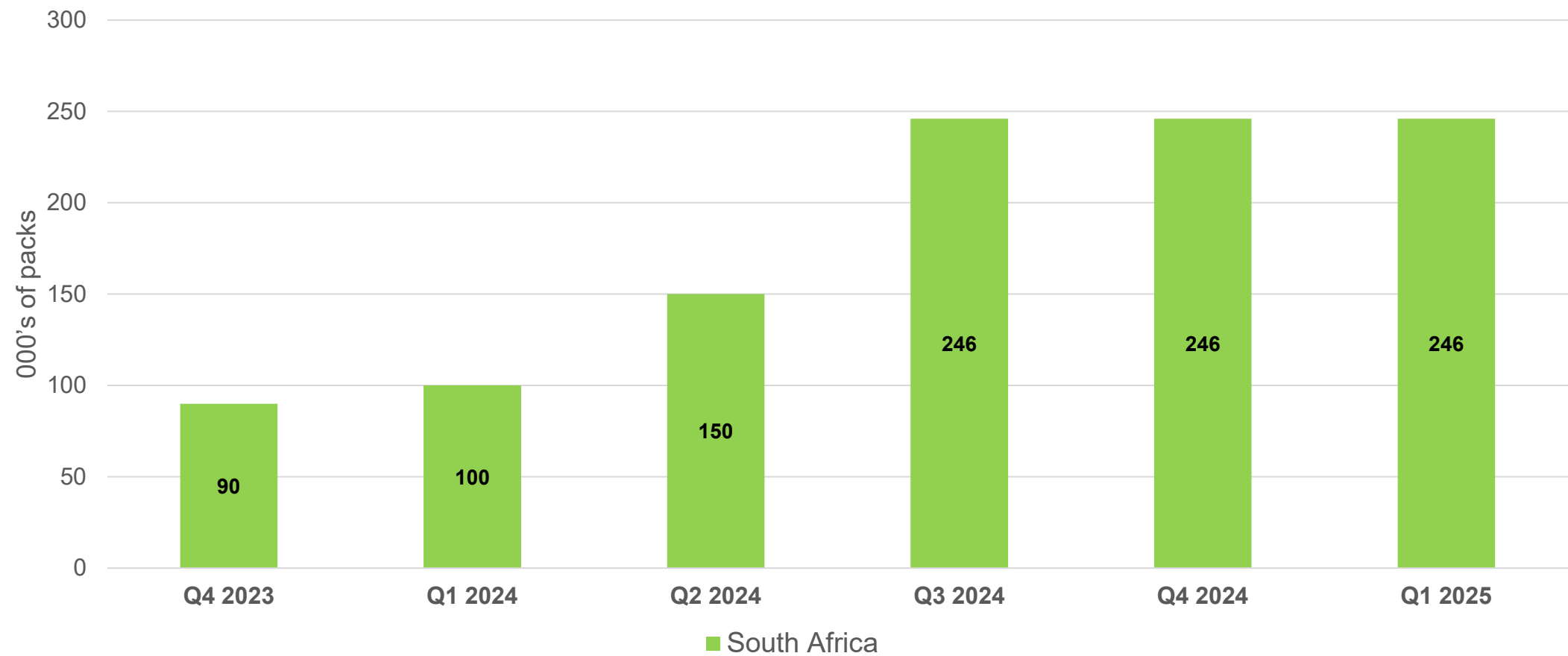
Republic of South Africa

DTG 10 mg, 90 scored, dispersible tablets



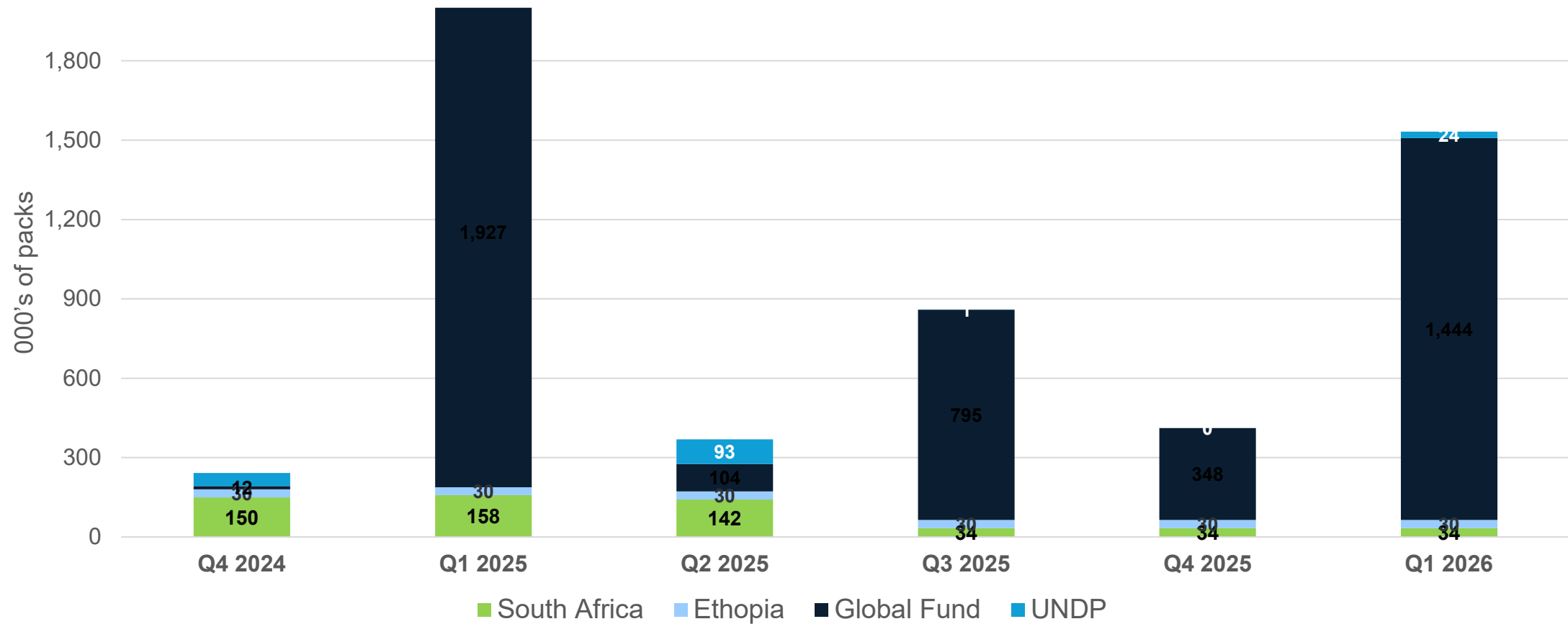
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

DTG 10 mg, 30 scored, dispersible tablets



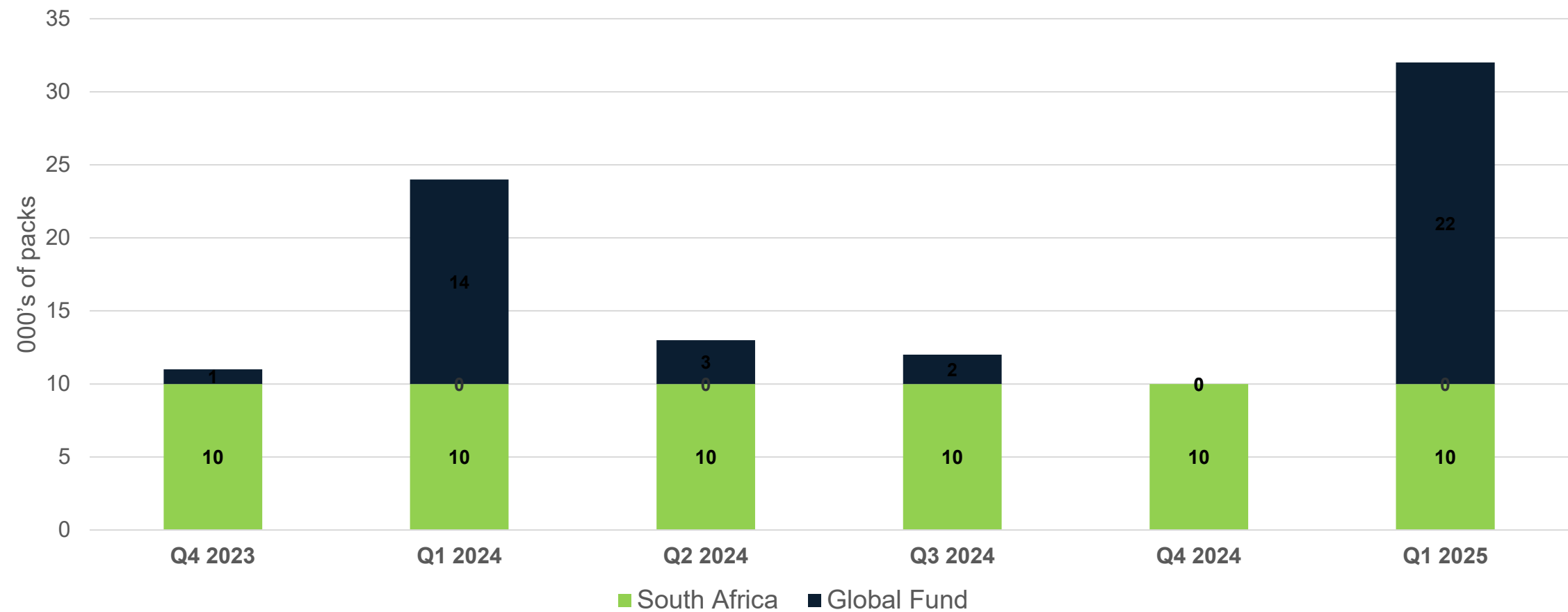
Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

ABC/3TC 120/60 mg, dispersible 30 tablets



Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

LPV/r 100/25 mg, 56-60 tablets



Source: Submissions from PEPFAR, Global Fund, South Africa, UNDP
Notes:

POSTNATAL PROPHYLAXIS

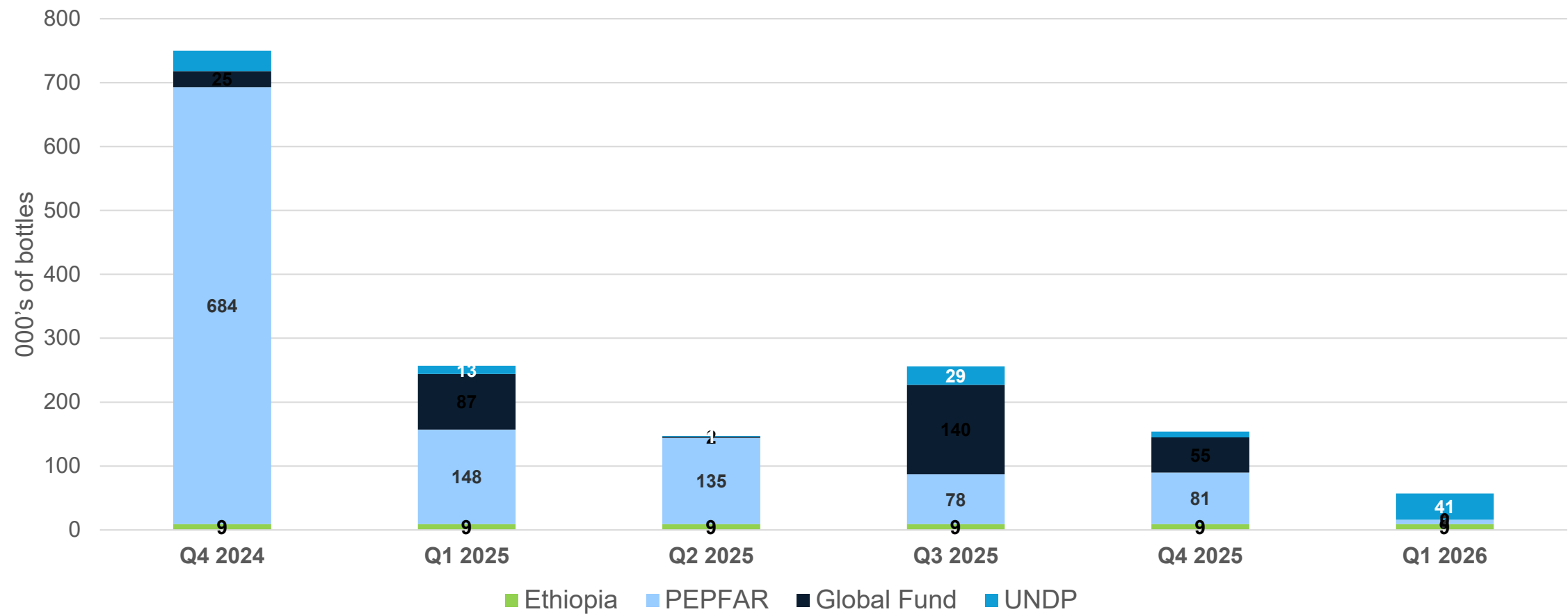
18 MONTH CONSOLIDATED FORECAST

Nov 2024



Republic of South Africa

Nevirapine 10 mg/ml oral suspension, 100 ml



Source: Submissions from GHSC-PSM, Global Fund, South Africa, UNDP

2024 ANNUAL ARV BUYER SELLER SUMMIT

Highlights by Procurement Channel with Q&A (Part 1)

Kenya, Rwanda, Uganda, and UNDP

Nov 2024



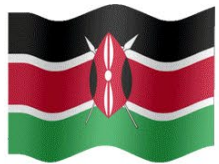
Republic of South Africa

Session Agenda/Overview

1. Introduction of Panelists
2. Panelist presentations Regarding Country/Organization's ARV Trends and Forecasts
3. Discussion with Panelists
4. Questions from Audience

Session Panelists

- **Dr. Evans Imbuki-** *Program Manager, HIV Health Products and Technologies, Kenya*
- **Mr. Allan Gakwandi-** *Transforming Rwanda Medical Supply Chain (TRMS) Project Director, Rwanda Medical Supply Ltd.*
- **Ms. Victoria Nakiganda Lubega-** *Program Management Specialist - Supply Chain, USAID/Uganda*
- **Ms. Mira Persson-** *Procurement Specialist, UNDP*



Kenya ARV Forecast 2024/25 to 2026/27

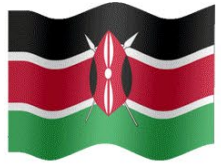
Presenter:

Dr. Evans Imbuki

**Program Manager, HIV Health Products and
Technologies**

**National AIDS and STI Control Program
(NASCOP)**

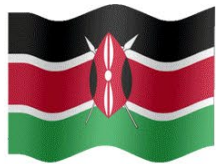
Ministry of Health, Kenya



Outline

- HIV situation in Kenya (2023 Estimates)
- Overall 95-95-95 Cascade
- September 2024 ART regimen Outlook
- Adult ARV 2024/25 orders and projections
- Pediatric ARV 2024/25 orders and projections





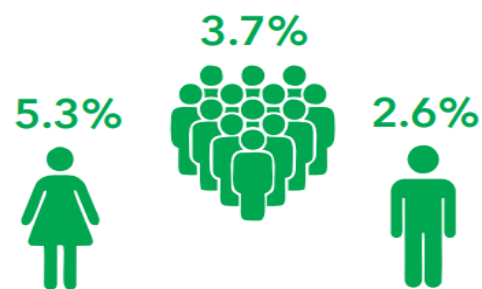
HIV situation in Kenya (2023 Estimates)



NATIONAL SYNDIC DISEASES
CONTROL COUNCIL

HIV in Kenya, 2023

HIV Prevalence



Estimated PLHIV

All ages			1,377,784
Adults		(15+)	1,309,915
Children		(0 - 14)	67,869
AYP		(15 - 24)	145,142
Adolescents		(10 - 19)	88,853

New HIV Infections

All ages		22,154
Adults (15+)		17,680
Children (0 - 14)		4,464

41%

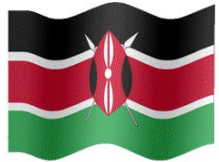
adult new HIV infections occur
among Adolescents and Young
People (15-24 years)

10 Year progress towards 2030

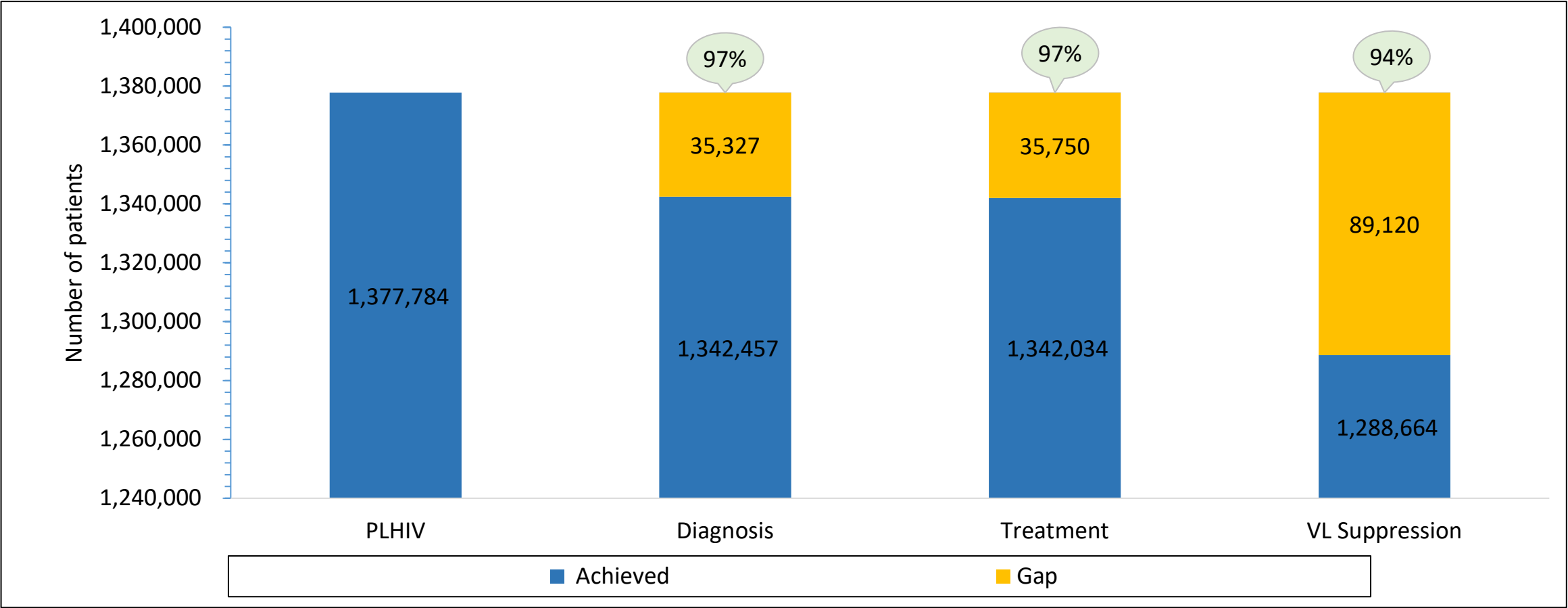
	Achievement
Reduction in new HIV infections	78.2%
Reduction in AIDS-related mortality	68.4%
Reduction in HIV-related stigma and discrimination	23.3%
Increased HIV domestic financing	34%

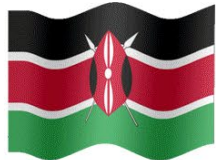
2023 HIV Estimates, NSDCC





Overall 95-95-95 Cascade





September 2024 ART Regimen Outlook



• Number of Patients on ART

Total 1,360,583

Adults 1,313,574

Pediatrics 47,009

Key Regimes: Adults

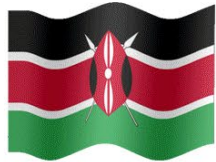
Regimen	Number	Proportion
TDF+3TC+DTG	1,216,873	92.6%
2nd Line: ATV/r-based	63,292	4.8%
2nd Line: DTG-based	17,503	1.3%
3rd line Regimens	768	0.06%

- Phased out: LPV/r 200/50mg
- On phase out: ATV/r
- Product introduction: **TAF LD**

• Key Regimens: Pediatric

Regimen	Number	Proportion
ABC+3TC+DTG	26,828	57%
TDF+3TC+DTG	15,399	33%
3rd Line regimens	133	0.3%

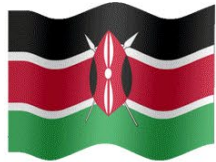
- **Phased out:** LPV/r (all formulations)
- Planned product intro: pALD (2025)



Adult ARV 2024/25 Orders and Projections



No.	ARV description	Pack Size	Order Quantity (July 2024 to Dec 2025)	Projection (July 2025 to June 2026)	Projection (July 2026 to July 2027)	Total
1	ABC+3TC 600/300mg	30s	80,819	80,819	81,103	242,741
3	DRV 600mg	60s	1,486	4,071	4,167	9,724
4	DRV/r 400/50mg	60s	4,896	10,130	10,802	25,828
5	DTG 50	30s	510,000	227,989	162,736	900,725
6	ETV 100mg	120s	99	120	120	339
7	RTV 100mg	30s	8,117	9,052	9,150	26,319
8	TAF+3TC+DTG 25/300/50mg	90s	207,600	432,876	432,876	1,073,352
9	TDF+3TC 300/300mg	30s	0	48,269	10,830	59,099
10	TDF+3TC+DTG 300/300/50mg	90s	5,874,455	5,222,429	5,235,262	16,332,146
11	TDF+FTC 300/200mg	30s	690,295	735,955	668,862	2,095,112
12	LA Cabotegravir	Vial	0	110,530	154,962	265,492
13	PrEP Ring (DVR)	No.	0	15,526	24,255	39,781

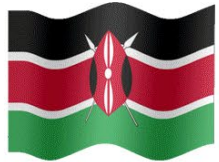


Pediatric ARV 2024/25 Orders and Projections



No.	ARV description	Pack Size	Order Quantity (July 2024 to Dec 2025)	Projection (July 2025 to June 2026)	Projection (July 2026 to July 2027)	Total
1	ABC+3TC 120/60mg dispersible	30s	0	37,985	38,586	76,571
2	ABC+3TC+DTG 60/30/5mg	90s	1,011,986	0	688,729	1,700,715
3	DTG 10mg -Dispersible	90s	0	9,416	9,997	19,413
4	DRV 150mg	240s	469	520	520	1,509
5	DRV 75mg	480s	138	86	86	310
6	Zidovudine OS 10mg/ml	240ml	163,705	113,206	113,206	390,117
7	Nevirapine Susp 10mg/ml	100ml bottle	346,383	705,754	768,111	1,820,248





Thank You!





Rwanda ARVs Supply Plan and Forecasts



November , 2024



Rwanda HIV Situation



Children on ART < 15 yrs



Adults on ART $\geq$ 15 yrs



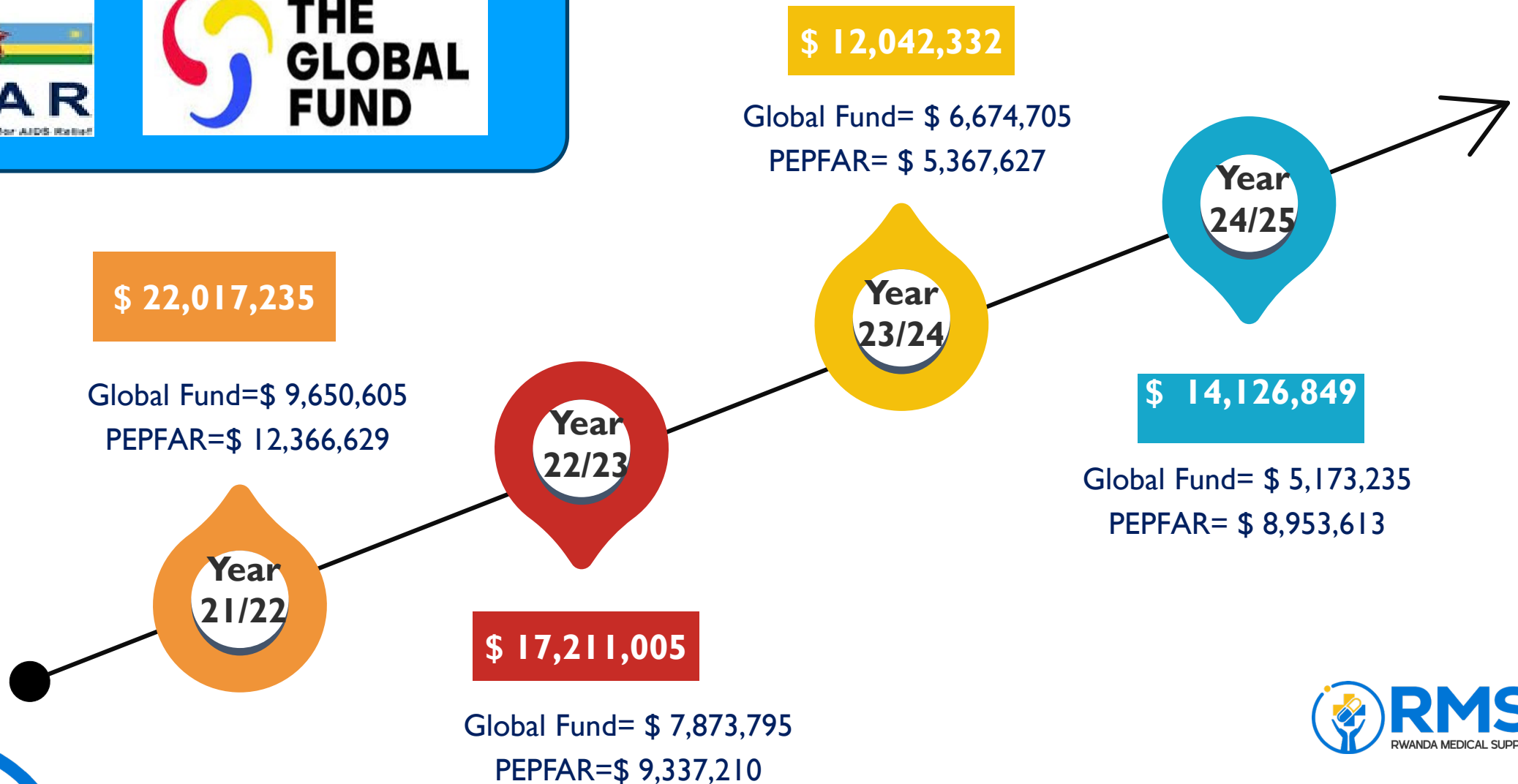
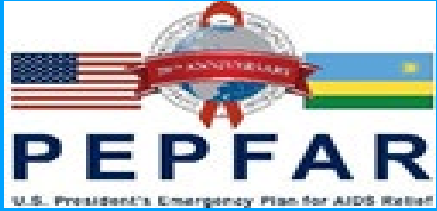
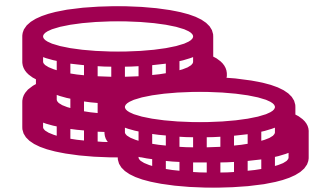
Total number of patients on ARTs



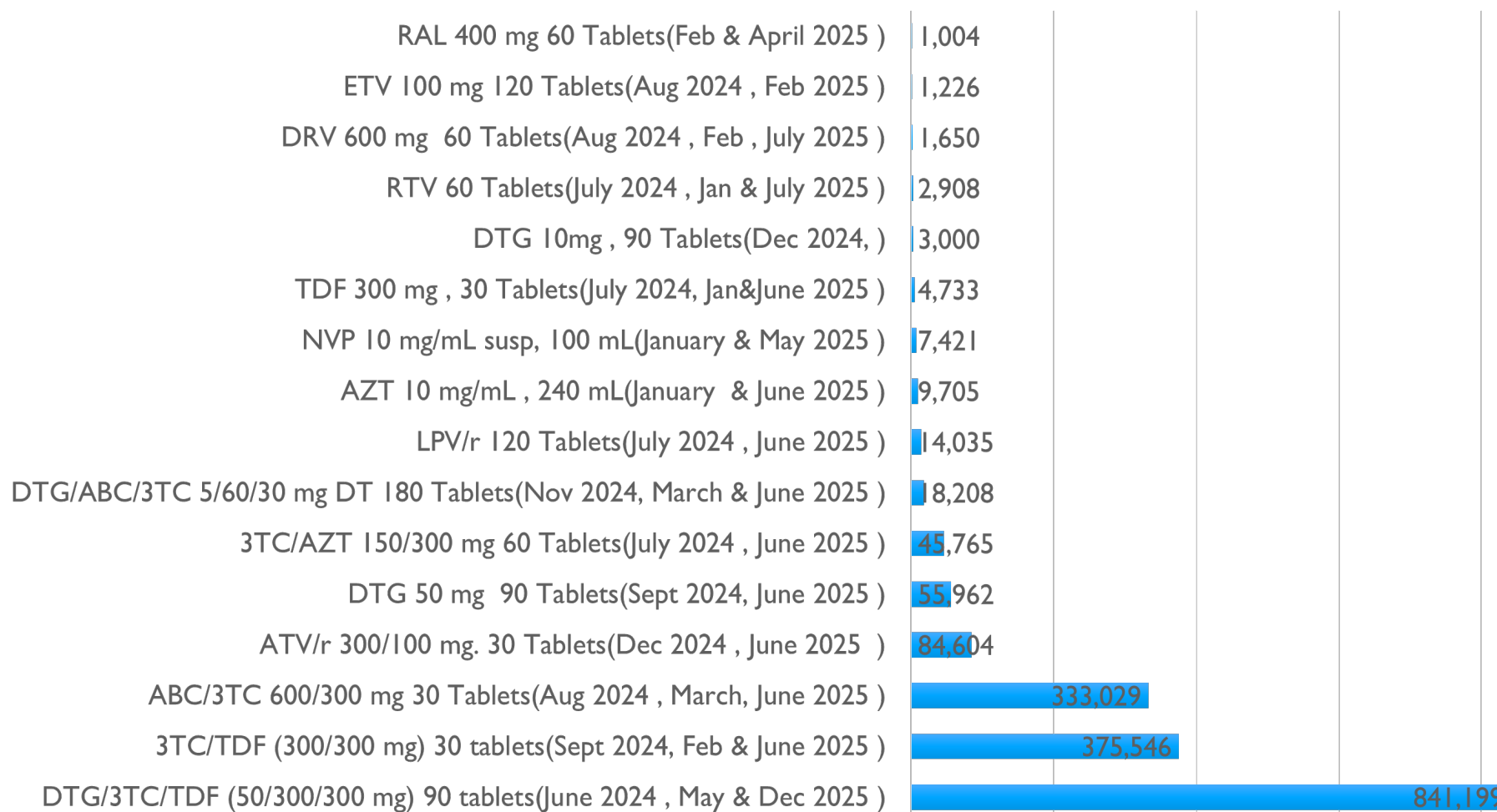
*** September 2024
Estimates**



Rwanda ARV Funding Partners - Estimated Procurement Spend



ARVs and PrEP - Supply Plan 2024- 2025





ARVs and PrEP – Forecast



Product Description	July 2025 to June 2026	July 2026 to June 2027	July 2027 to June 2028
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 90 Tablets	624,824	627,183	627,114
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 30 Tablets	442,275	443,944	443,895
Abacavir/Lamivudine 600/300 mg Tablet, 30 Tablet	227,584	227,560	226,718
Atazanavir/Ritonavir 300/100 mg Tablet, 30 Tablets	84,293	83,695	82,813
Dolutegravir 50 mg Tablet, 90 Tablets	55,788	55,899	55,805
Lamivudine/Zidovudine 150/300 mg Tablet, 60 Tablets	48,449	48,533	48,461
Tablets	45,125	45,291	45,327
Dolutegravir 50 mg Tablet, 30 Tablets	43,392	43,351	43,168
Dolutegravir/Abacavir/Lamivudine 5/60/30 mg Dispersible, 180 Tabs	18,409	17,583	16,800
Lopinavir/Ritonavir 200/50 mg Tablet, 120 Tablets	8,695	8,581	8,435
Efavirenz 200 mg Scored Tablet, 90 Tablets	7,908	7,881	7,832
Nevirapine 10 mg/mL Suspension, 100 mL	7,764	7,764	7,764
Zidovudine 10 mg/mL Solution w/ Syringe, 240 mL	7,764	7,764	7,764
Tenofovir DF 300 mg Tablet, 30 Tablets	2,480	2,490	2,491
Ritonavir [Norvir] 100 mg Film-Coated Tablet, 60	1,863	1,834	1,802
Darunavir 600 mg Tablet, 60 Tablets	1,165	1,168	1,168
Raltegravir [Isentress] 400 mg Tablet, 60 Tablets	1,165	1,168	1,168
Lamivudine/Zidovudine 30/60 mg Tablet, 60 Tablets	1,123	1,072	1,025
Lopinavir/Ritonavir 100/25 mg Tablet, 60 Tablets	923	832	748
Etravirine 100 mg Tablet, 120 Tablets	822	825	824
Atazanavir 200 mg Capsule, 60 Capsules	567	540	514
Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet, 60 Tablets	483	432	385
Atazanavir 150 mg Capsule, 60 Capsules	131	126	121



Rwanda ARV Program –Trends



Transition from pDTG + ABC/3TC to Pediatric ABC/3TC/DTG (pALD)



Use of long-acting injectable Cabotegravir (CAB-LA)



Local Sustainability Drive



Thank you





CONTACT US

info@rmsltd.rw • www.rmsltd.rw

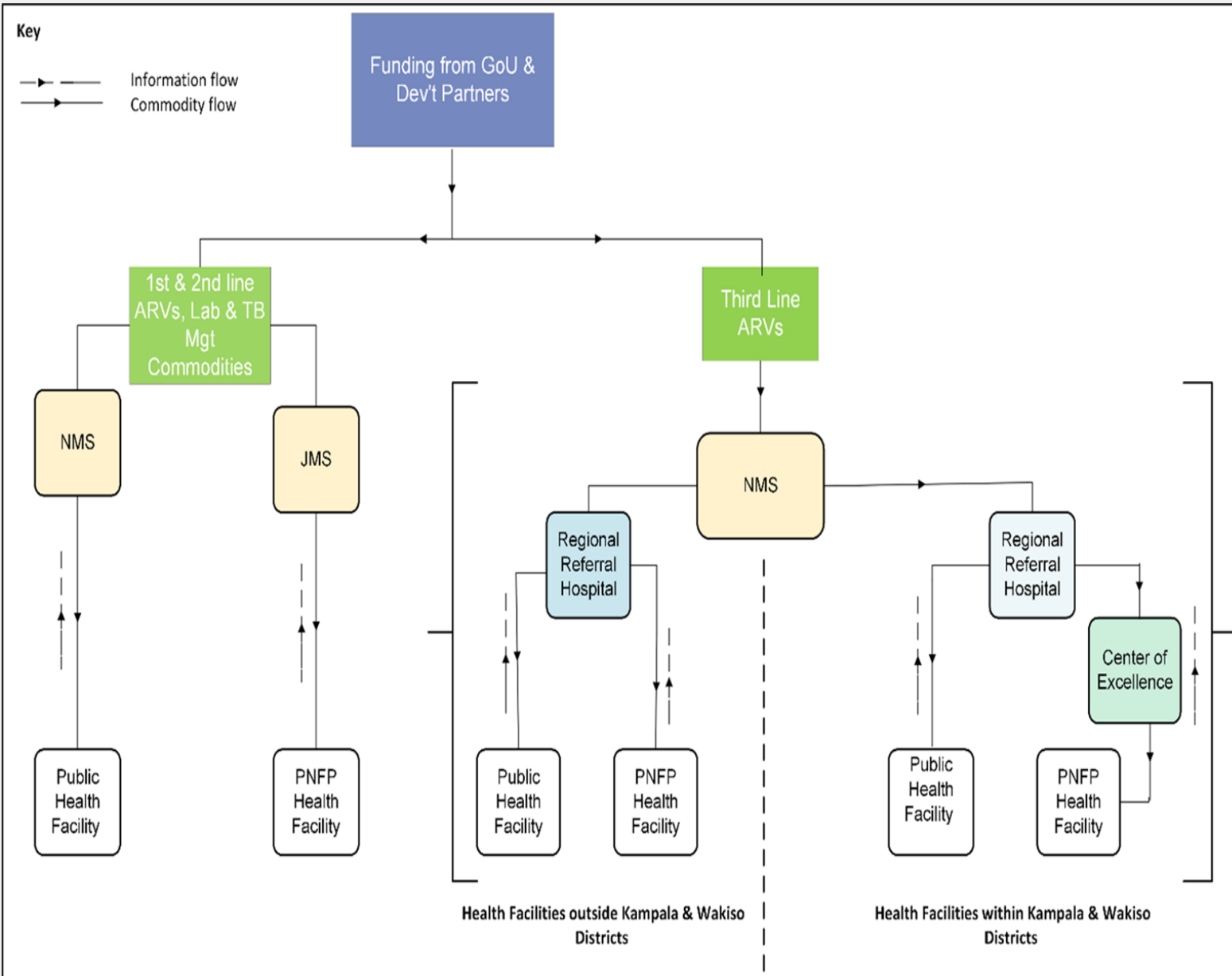
KN 8 AVE , KG 509 ST KIGALI

ARV Buyer/Seller meeting

Uganda context

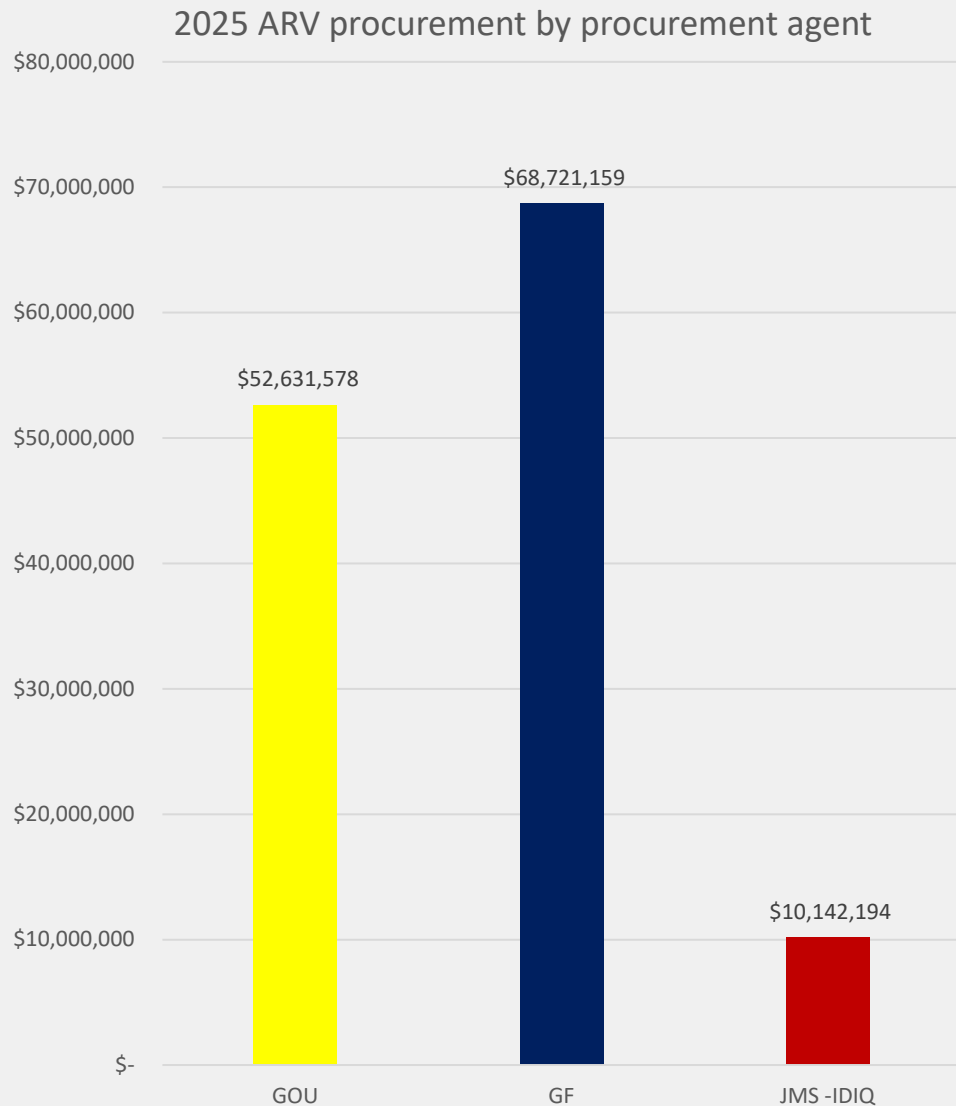
November 18, 2024

Uganda's context regarding the ARV program



- As of June 2024, 1,444,813 patients are on ART with 97% on DTG based regimens.
- 70% of the clients accessing care from the Public sector.
- ARVs are funded by both the GoU and development partners (Global Fund and PEPFAR).
- GOU funded ARVs are procured from a local manufacturer
- TGF and PEPFAR procurements done by independent PSAs who procure globally.
- DRV formulations and ETV for children and adolescents are a donation through the New Horizons Program.

Uganda's context regarding the ARV program



- Uganda uses both morbidity (Spectrum data/Program data) and consumption data to forecast the country's need.
- Supply planning is done taking into consideration the budgets of the main funders (GOU, GF & PEPFAR), so far Uganda's ARV needs have been fully funded.
- Central level operates a Min-Max of 3–6MOS which guides placement of orders determined during the quarterly supply planning by the MOH.
- Timely order placement coupled with monthly stock status reviews are meant to ensure optimal stock levels and uninterrupted service delivery.
- Challenges include:
 - ✓ Funding Delays
 - ✓ Extended lead times from the manufactures

Country forecast for Adult ARVs, Pediatric ARVs, and PrEP

PNFP Sector - COP 23 Yr 2										
Product	25-Jan	25-Feb	25-Mar	25-Apr	25-May	25-Jun	25-Jul	25-Aug	25-Sep	Total
Emtricitabine/Tenofovir DF 200/300 mg Tablet 30 Tablets		568,707	532,128			736,262				1,837,097
Dolutegravir/Abacavir/Lamivudine 50/600/300 mg Tablet 30 Tablets	44,968		37,618			47,903				130,489
Efavirenz 200 mg Tablet 90 Tablets		671			870			253		1,794
Ritonavir 25 mg Tablet 60 Tablets	325			139			191			655
Abacavir/Lamivudine 600/300 mg Tablet 30 Tablets	6,924			2,940			3,000			12,864
Lamivudine/Tenofovir DF 300/300 mg Tablet 30 Tablets	4,889				4,132			4,175		13,196
Lamivudine/Zidovudine 150/300 mg Tablet 60 Tablets			20,585			25,517				46,102
Lamivudine/Zidovudine 30/60 mg Tablet 60 Tablets	4,458				6,131				6,168	16,757
Nevirapine 10 mg/mL Suspension 100 mL				3,616				3,920		7,536
Ritonavir 100 mg Tablet 30 Tablets			96			97			99	292
Dolutegravir/Abacavir/Lamivudine 5/60/30 mg Dispersible Tablet 180 Tablets		28,613			34,187			27,252		90,052
Dolutegravir 50 mg Tablet 30 Tablets						15,492			17,507	32,999
Darunavir/Ritonavir 400/50 mg Tablet 60 Tablets					40,764				23,730	64,494

PNFP sector procurement is primarily funded by PEPFAR

Country forecast for Adult ARVs, Pediatric ARVs, and PrEP

Public Sector - 2025													
Product	25-Jan	25-Feb	25-Mar	25-Apr	25-May	25-Jun	25-Jul	25-Aug	25-Sep	25-Oct	25-Nov	25-Dec	Total
Dolutegravir 50 mg Tablet 30 Tablets					58,027		58,028	56,964		56,964		26,000	255,983
Dolutegravir/Abacavir/Lamivudine 50/600/300 mg Tablet 30 Tablets	76,603	95,828		67,205	55,765		50,400	55,765		80,014		70,014	551,594
Lamivudine/Zidovudine 30/60 mg Dispersible Tablet 60 Tablets		9,750		6,555	3,100			5,500		5,500		4,500	34,905
Nevirapine 10 mg/mL Suspension w/ Syringe 100 mL			25,368		20,832			18,900			11,500	18,000	94,600
Darunavir/Ritonavir 400/50 mg Tablet 60 Tablets		32,496	48,840		32,016					23,242	21,000	32,627	190,221
Dolutegravir/Abacavir/Lamivudine 5/60/30 mg Dispersible Tablet 90 Tablets	43,599	43,598		50,168	24,370			24,370	381,784		26,810		594,699
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet 90 Tablets		540,000			549,821			450,000	350,000		600,000		2,489,821
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet 30 Tablets		138,285			144,551								282,836
Raltegravir 400 mg Tablet 60 Tablets				800		450			330		435		2,015
Ritonavir 100 mg Tablet 30 Tablets					6,294			9,844			5,466		21,604
Abacavir/Lamivudine 600/300 mg Tablet 30 Tablets			12,669				11,196				10,183		34,048
Efavirenz 200 mg Tablet 90 Tablets			2,050		2,092	1,500			1,596				7,238
Darunavir 600 mg Tablet 60 Tablets						6,955			7,089				14,044
Dolutegravir 10 mg Scored Dispersible Tablet 90 Tablets					1,427		1,528			1,423			5,905
Public Sector procurement is primarily funded by GOU and Global Fund													
Ritonavir 25 mg Tablet 30 Tablets					350		300		350		300		1,200

Thank you



UNDP Procurement updates

**Mira Persson,
Procurement Specialist, UNDP**

3 GOOD HEALTH
AND WELL-BEING



HEALTH PSM ARCHITECTURE

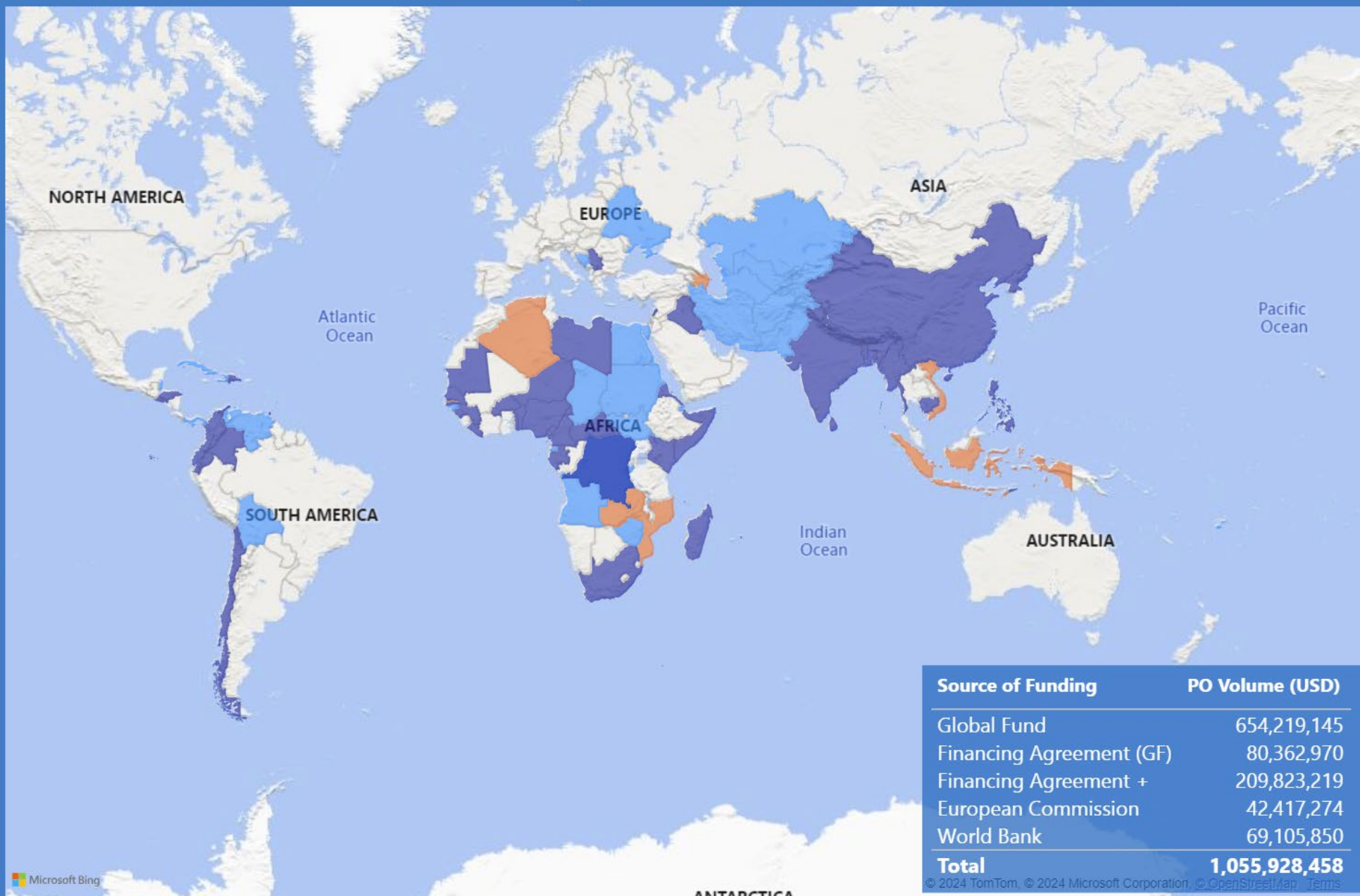


Health PSM	Copenhagen	Quality Assurance of Health Products
		Centralized Procurement of Medicines
		Centralized Procurement of Medical Devices, Diagnostics, Equipment & Other Health Products
	GPN Roster	Roster of PSM Experts

Specialized Support	Copenhagen	ELMIS Support
	New York	Global Legal and IP expertise
	Istanbul	Digital Health

Product categories	Agreement
Paediatric ARV medicines	MoU with UNICEF
Reproductive Health products	MoU with UNFPA
Second line TB medicines	Through GDF/ Stop TB Partnership/UNOPS
ARV (adult formulation)	Global LTAs with manufacturers
1st line TB medicines	
Anti-malaria medicines	
Anti Hepatitis B/C medicines	Global LTAs with manufacturers and distributors
Non-Communicable Diseases and other Essential Medicines	
Covid-19 Therapeutics	Global prequalified Roster of manufacturers
Health equipment, Medical devices and Laboratory consumables (including, ambulances and mobile clinics, IVDs, RDTs PPE, waste management etc.)	Global LTAs with manufacturers and distributors
Vector control (ITNs, IRS, sprayers, PPE)	Global LTAs with manufacturers and distributors
<u>Auxiliary and Digital services</u>	
International Freight Forwarding services	Global LTAs
Cargo and Warehouse Insurance	
Pre-shipment inspection and independent sampling	
Quality Control Laboratory testing	Global LTA
ELMIS software services	
Data loggers	Global LTA

PO TOTAL VOLUME (USD) by COUNTRY OFFICE and SOURCE OF FUNDING

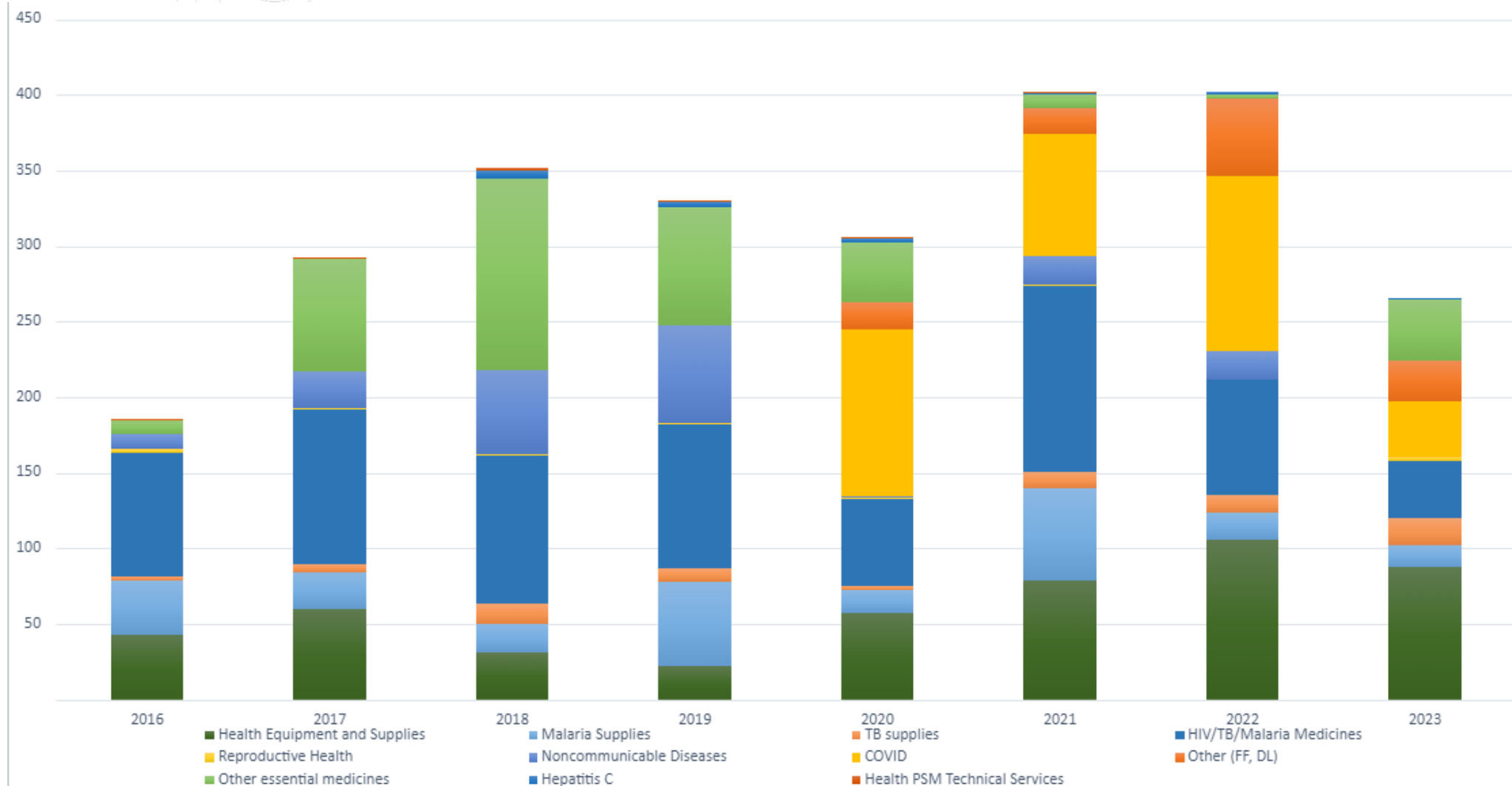


**UNDP
HEALTH
PROCUREMENT
KEY FACTS:**

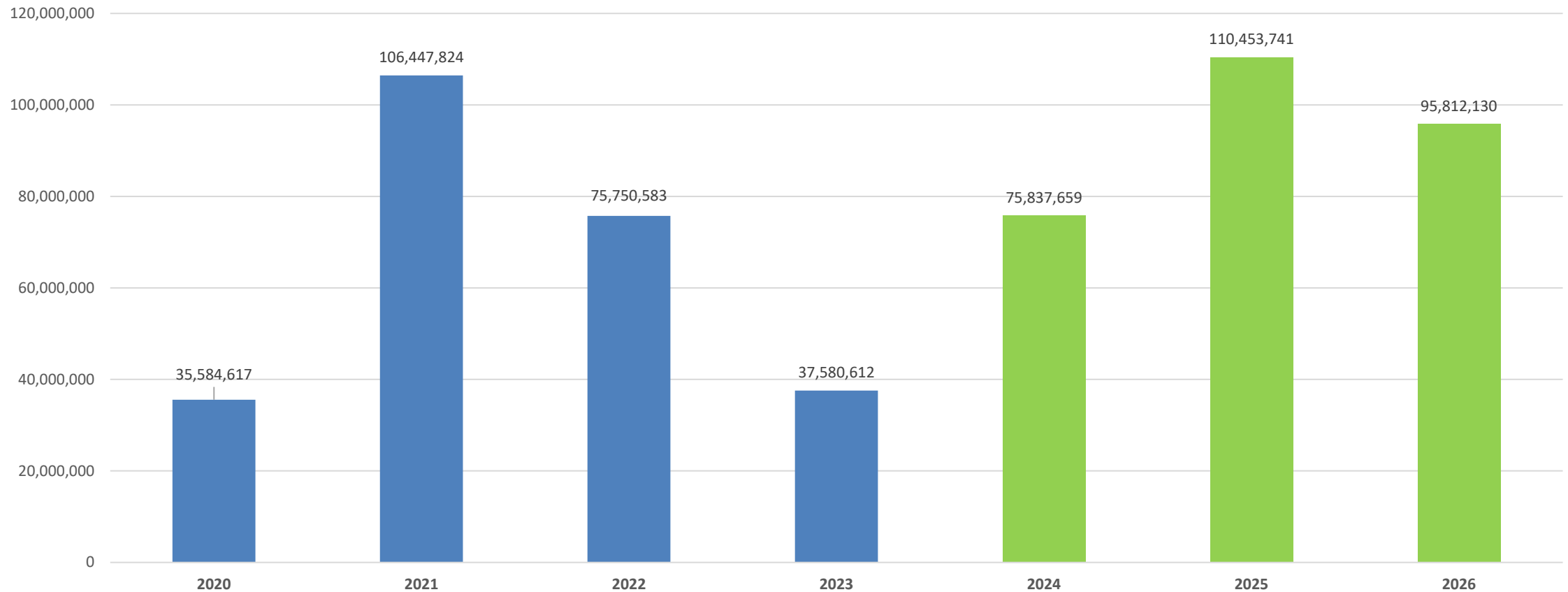
**We support
annually
around 50 to 60
countries**

● Global Fund ● Financing Agreement (GF) ● Financing Agreement + ● European Commission ● World Bank

HEALTH PROCUREMENT VOLUMES: 2016 – 2023, M USD



ARV Procurement Volume 2020-2023 & Projections for 2024-2026



Link to new business opportunities:

<https://procurement-notice.undp.org/search.cfm>

<https://www.ungm.org/>



Thank you!

Session Discussion Questions

What are some unique aspects of your country/organization's ARV program that differentiates your program from the larger Global Fund/PEPFAR ARV program?

What are some key values that you would like for manufacturers to understand about your ARV program?

Please describe how your organization develops its ARV orders, and what determines when orders are placed?

Thank you

With the remaining time, we will open the session to audience questions

Highlights by Procurement Channel with Q&A (Part 1)

Kenya, Rwanda, Uganda, and UNDP

Nov 2024



Republic of South Africa

USAID Global Standards & Traceability Objectives

Our Objectives

Implement supply chain efficiencies



Enable end-to-end data visibility



Improve supply chain security



Advance patient safety



What We Do

**Thought
Leadership**

**Global Data Strategy
& Governance**



**Strategic
Engagement**

**Health Systems
Strengthening**

Progress in standards adoption since 2010

National Regulations

Ethiopia

Rwanda

Zambia

Nigeria (draft)

Ghana (draft)

South Africa (draft)

Ongoing GHSC-PSM
Technical Assistance

Ongoing in other USAID
projects

Ongoing Advocacy,
Education, Awareness

November 2024



SUPPLY CHAIN INFORMATION DATA TYPES

	DEFINITION	EXAMPLES OR DESCRIPTION
 MASTER DATA	ITEM: product identifiers and associated descriptive attributes LOCATION: facility (legal entity) identifiers and associated descriptive attributes	ITEM: Manufacturer, brand name, item description, unit of measure, net content, shelf life LOCATION: Address, contact information, role
 TRANSACTION DATA	Information about production, planning ordering, delivering, paying, and other transaction-related processes that occur through the supply chain	Order quantity, units sold, stock on hand, forecasted units, price
 EVENT DATA	Information about the physical movement and status of products as they move through the supply chain	Commissioning, shipping, receiving, decommissioning

USAID-Supported Data Sharing Initiatives

Data Type	GS1 Standard	Global Initiatives	Country Initiatives
Master Data	GS1 Global Data Synchronization Network (GDSN)	Master data exchange between suppliers and GHSC-PSM required via GDSN as of December 2019	• National product catalog deployed in 4 countries • GDSN being leveraged for data exchange in 3 countries
Transaction Data	GS1 XML Electronic Data Interchange (EDI)	EDI pilot for PO,ASN and Invoice between GHSC-PSM and select suppliers in FY25	• GS1 AIDC barcode scanning underway in 5 national warehouses • GS1 dispatch advice pilot planned in 4 countries in FY25
Event Data	Electronic Product Code Information Services	Traceability Interoperability Platform (TIOP) prototype and pilot with 2 suppliers in FY24	• Regulations passed in 3 countries and drafted in 3 additional countries • TIOP pilot completed with Nigeria in FY24 and Zambia in FY25

Today's Panelists



Lindabeth Doby
Senior Digital SC
Advisor
USAID



Chaitanya Prakash
Deputy General Manager
Aurobindo



Kaitlyn Roche
Data Visibility SME
GHSC-PSM



Tarang Verma
Assistant General Manager
Hetero

What are the challenges your organization has faced in supply chain data via manual processes in the absence of automated data exchange mechanisms?



What are some of the benefits your organization has gained on this journey of implementing GS1 standards and automated data exchange?





What do you wish you knew before you started this journey? What are some of the lessons learned to share with others who are just beginning?

**WHAT'S NEXT
FOR TREATMENT
AND POSTNATAL
PROPHYLAXIS?**

2024 ANNUAL ARV BUYER SELLER SUMMIT WHAT'S NEXT?

Sunday, 17 November 2024 —
Wednesday, 20 November 2024

Dar es Salaam, Tanzania



USAID
FROM THE AMERICAN PEOPLE

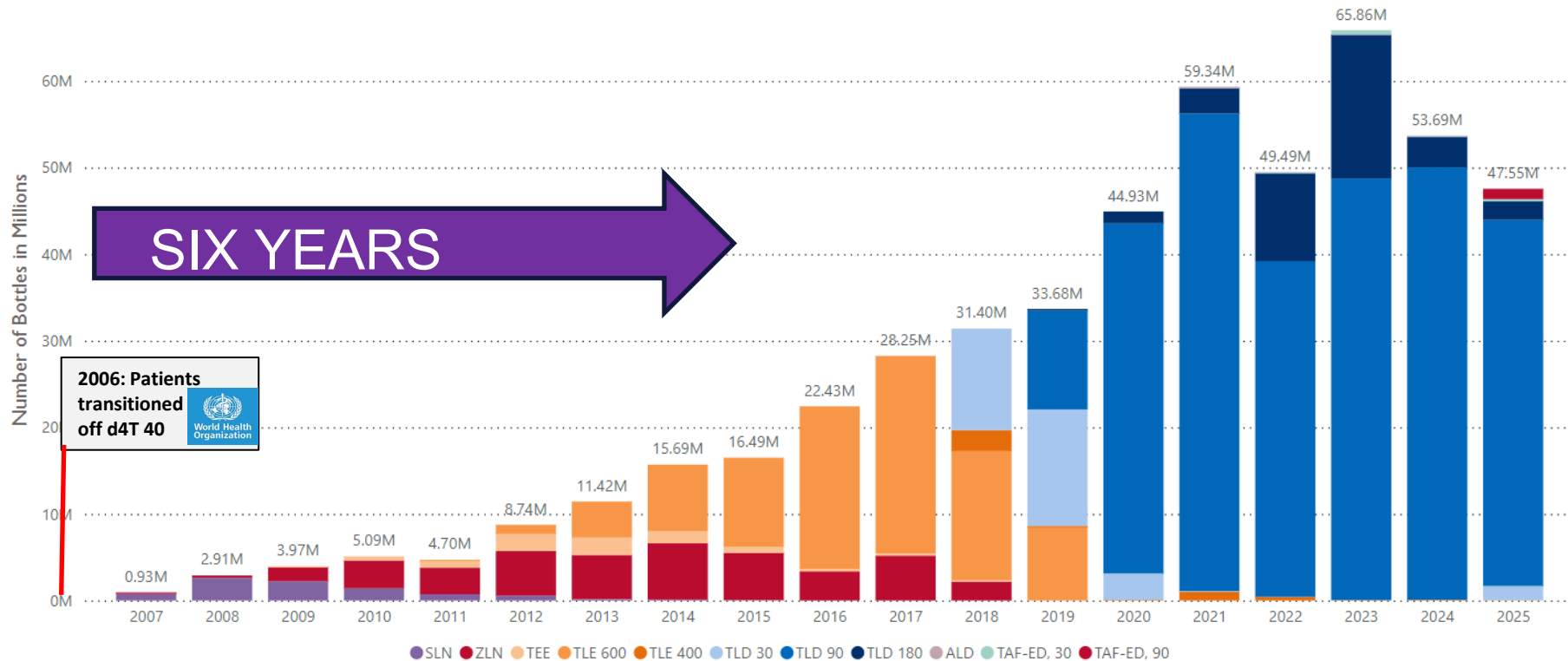


health

Department:
Health
REPUBLIC OF SOUTH AFRICA

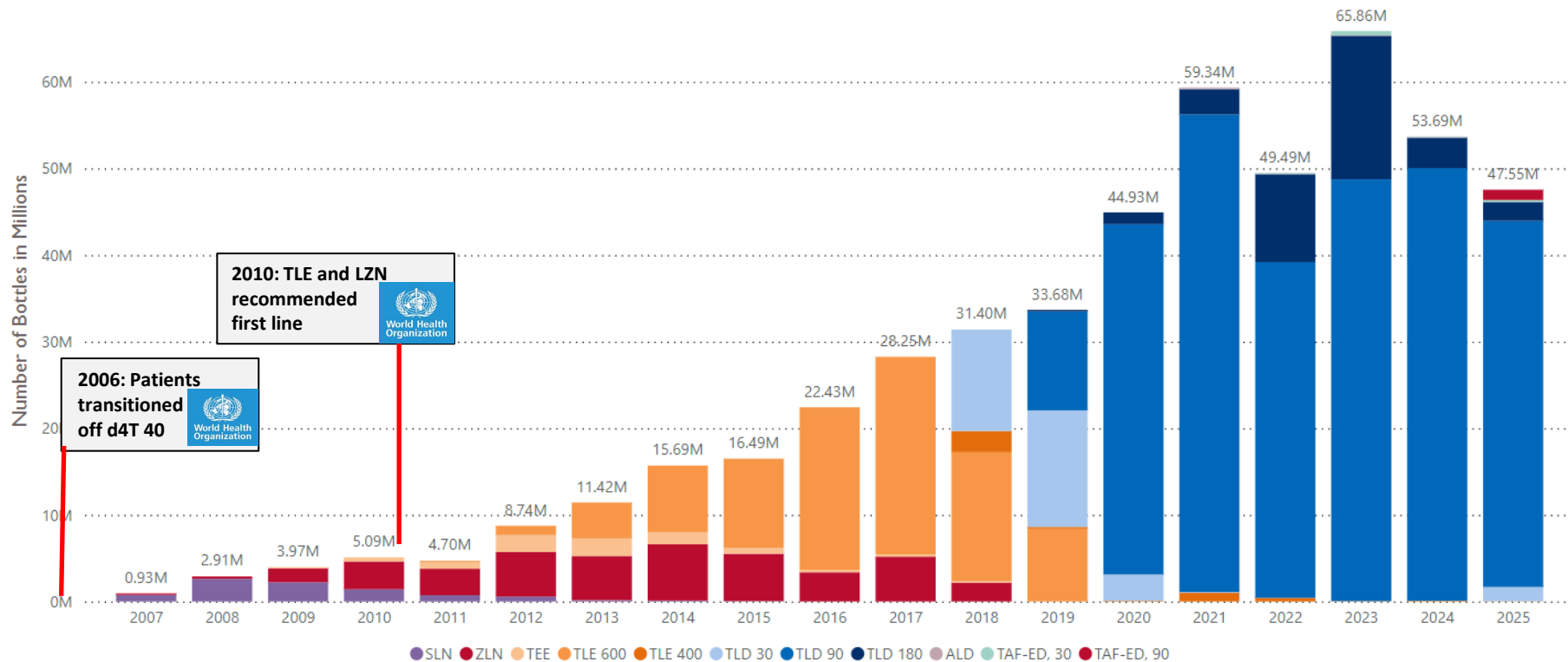
All TLD shown in TLD 30 equivalents

First Line Adult ARV

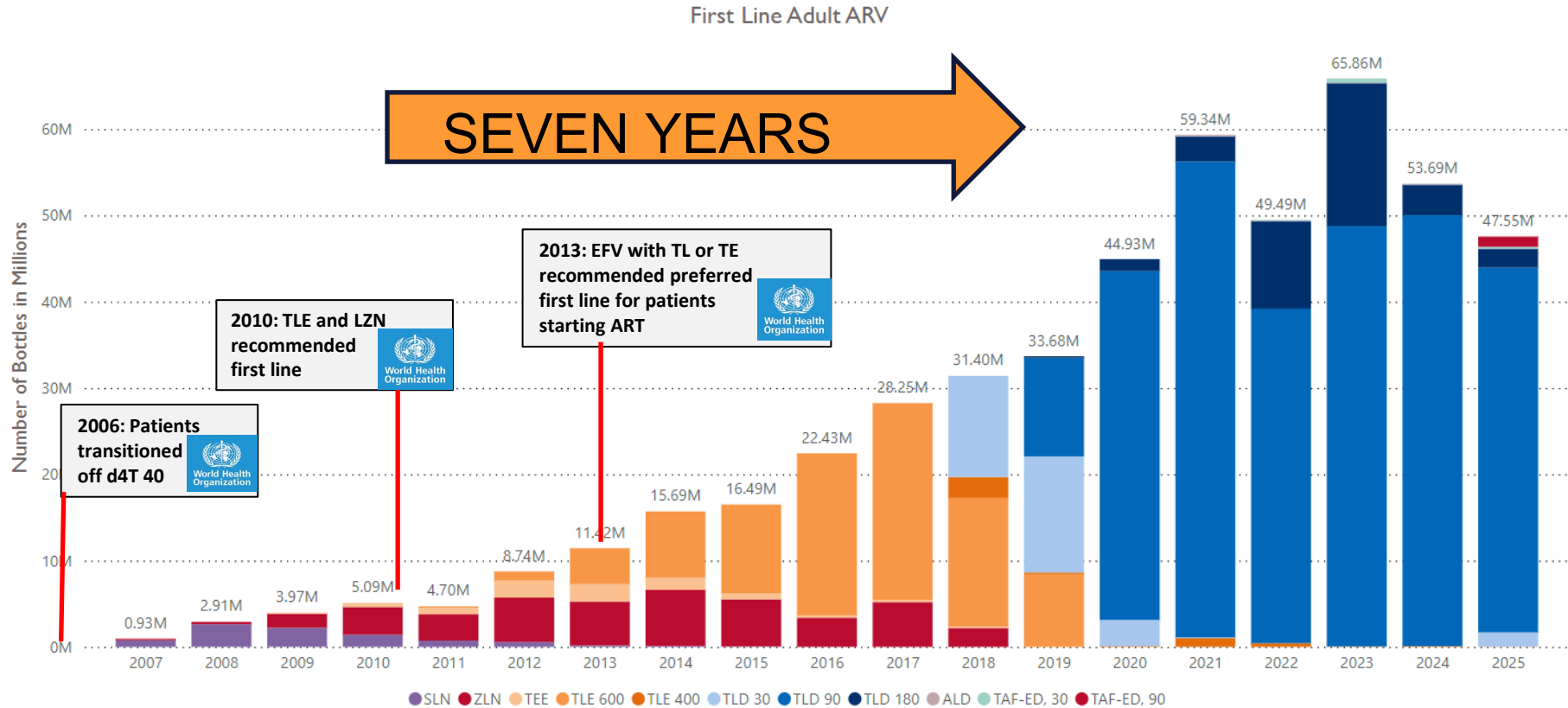


All TLD shown in TLD 30 equivalents

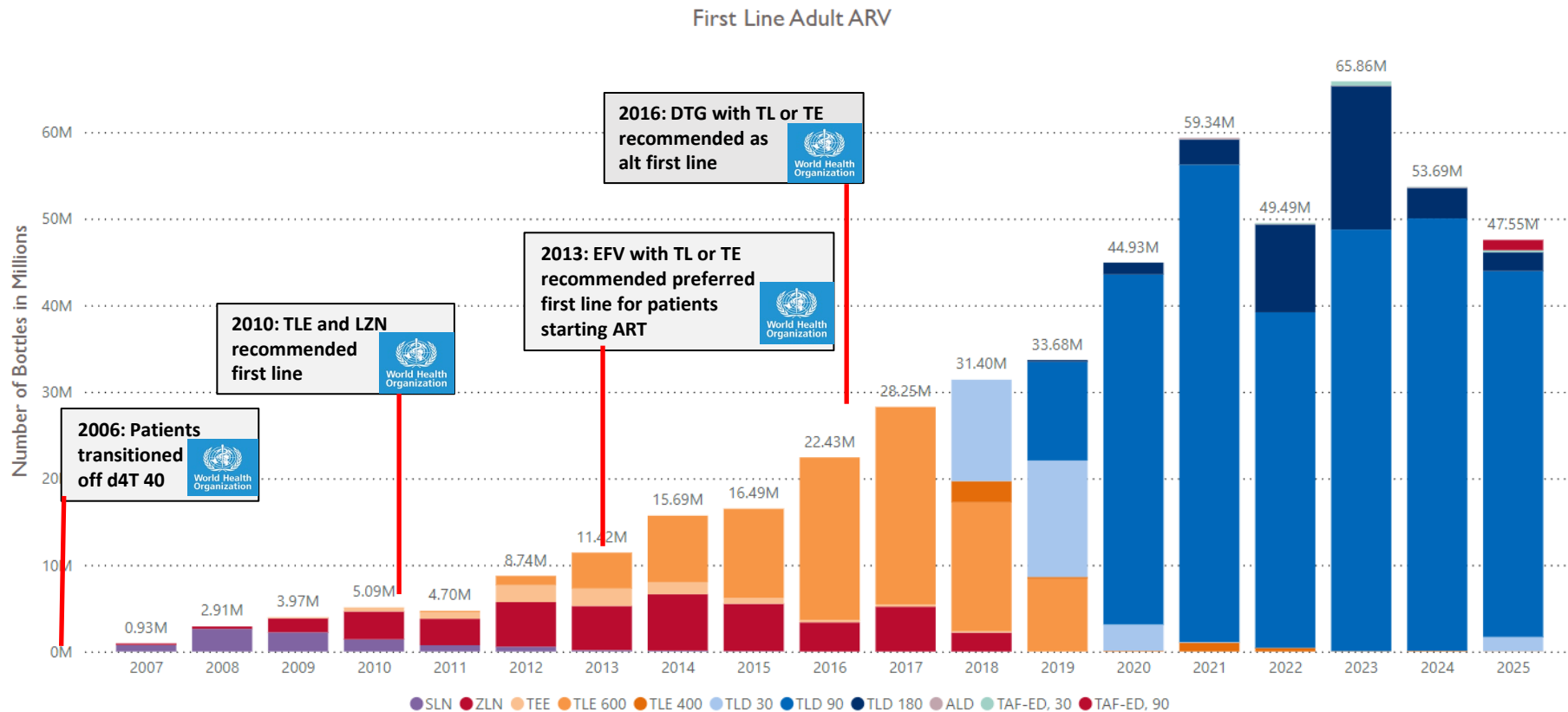
First Line Adult ARV



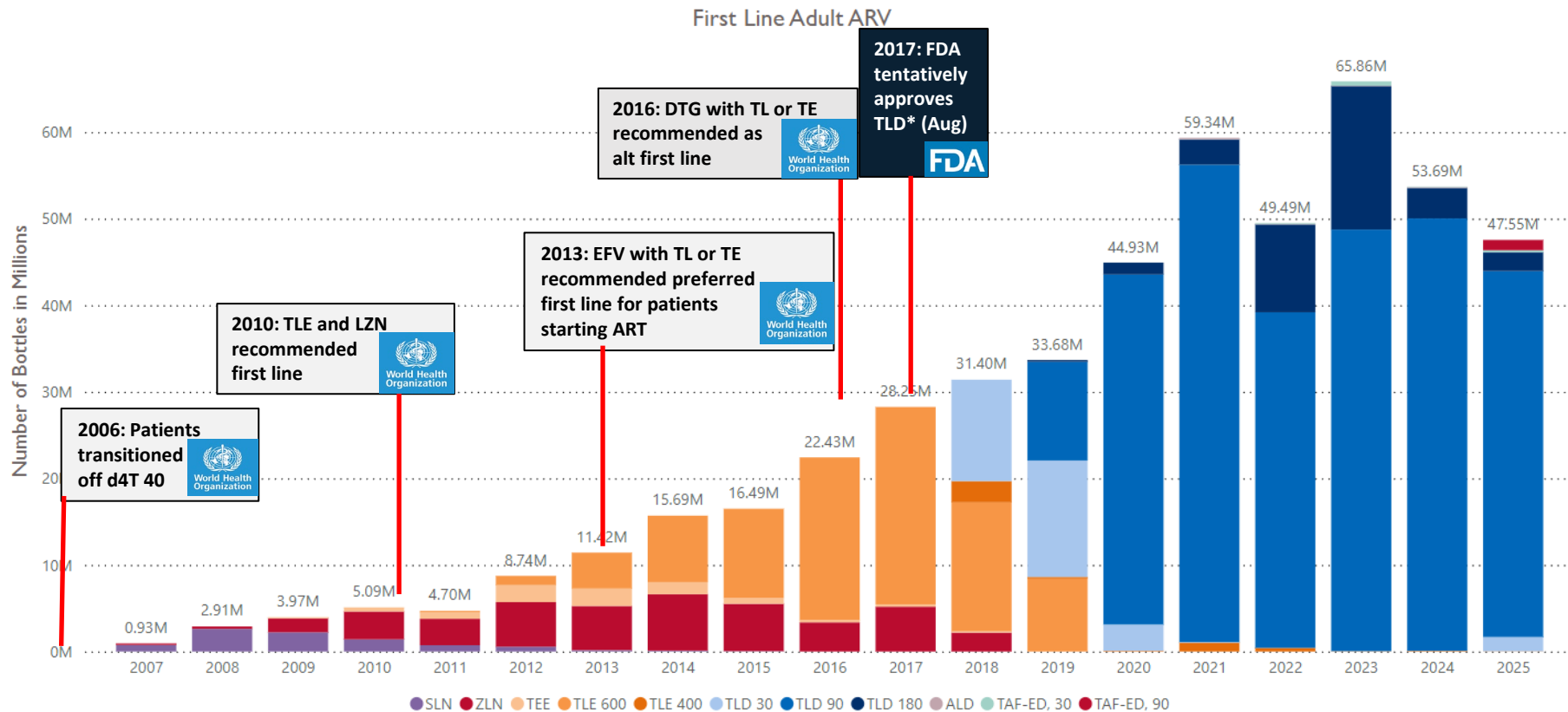
All TLD shown in TLD 30 equivalents



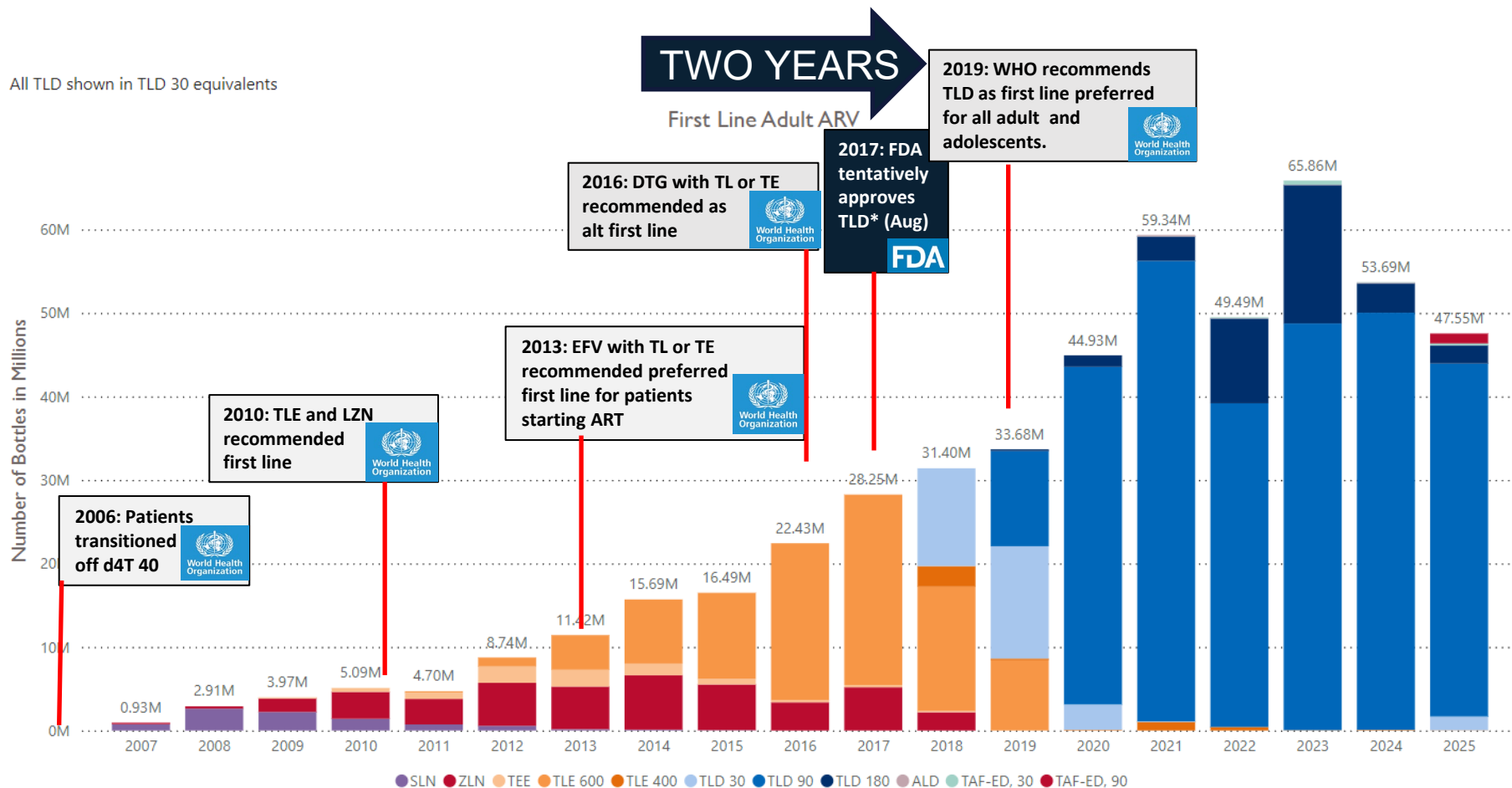
All TLD shown in TLD 30 equivalents



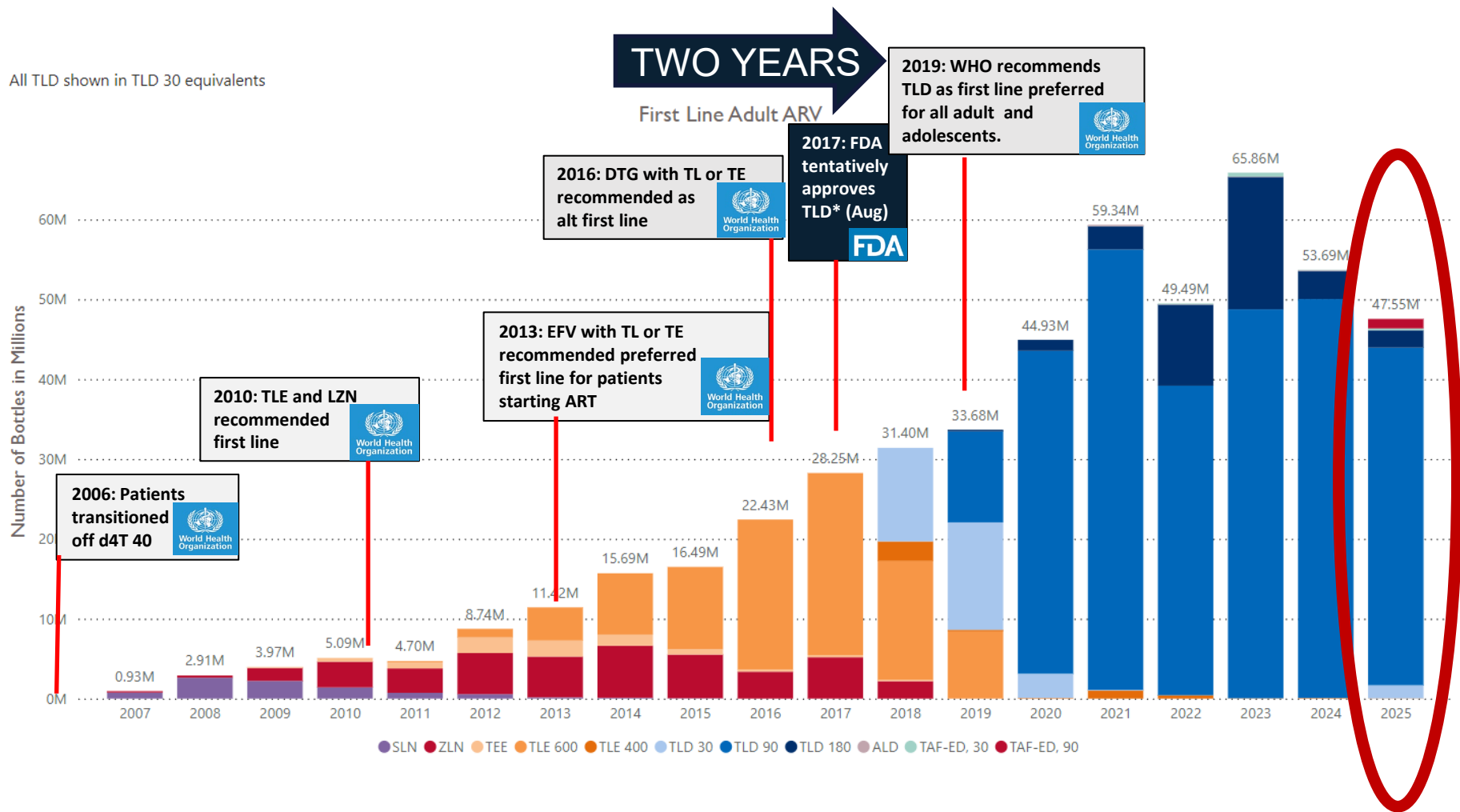
All TLD shown in TLD 30 equivalents



All TLD shown in TLD 30 equivalents



All TLD shown in TLD 30 equivalents



PLANNED ORDERS FOR 2025

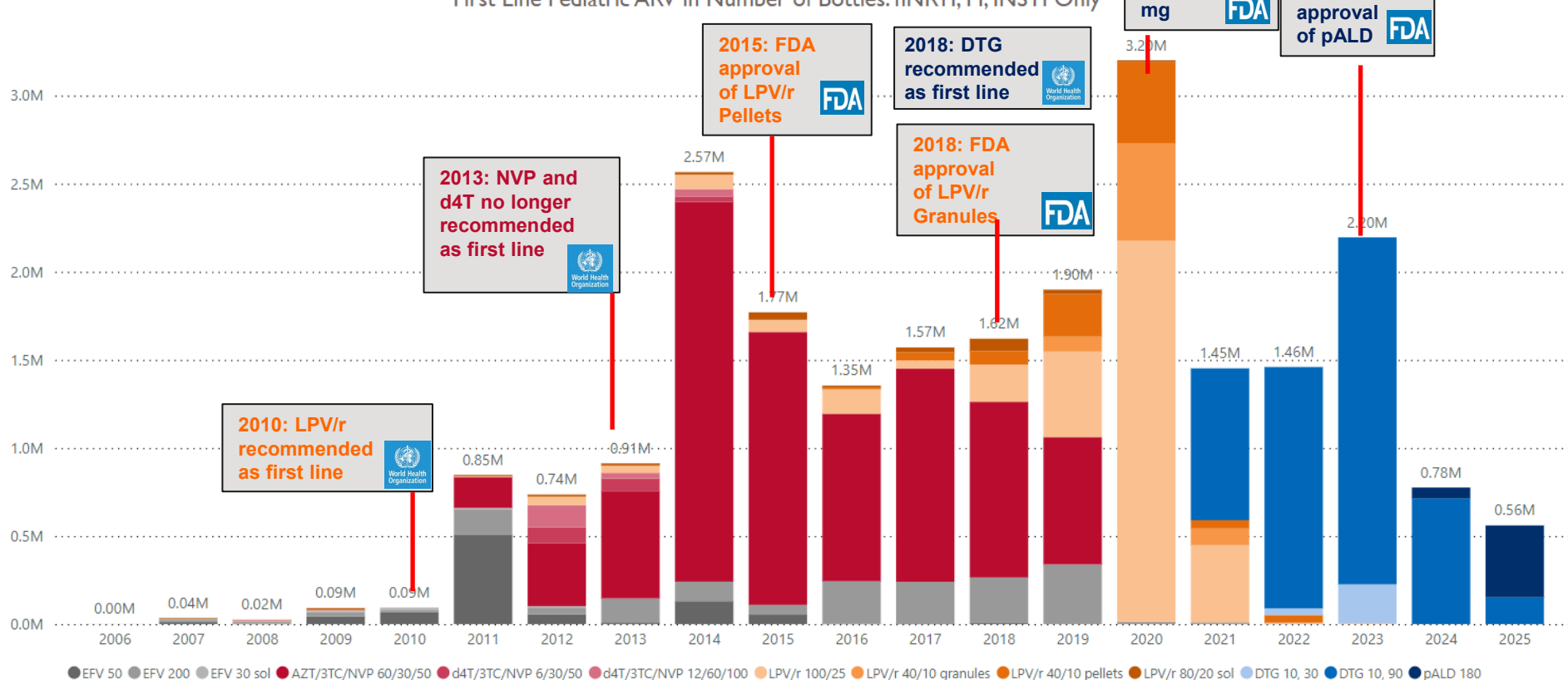
SYMBOL	QUANTITY	PERCENTAGE OF YTD TOTAL
ABC/3TC/DTG	7,438	0.02%
TAF-ED, 30	220,964	0.46%
TAF-ED, 90	1,185,585	2.49%
TLD 180	2,183,862	4.59%
TLD 30	1,638,902	3.45%
TLD 90	42,273,105	88.91%
TLE 400	36,661	0.08%



All DTG 10 shown in 90 tab equivalents

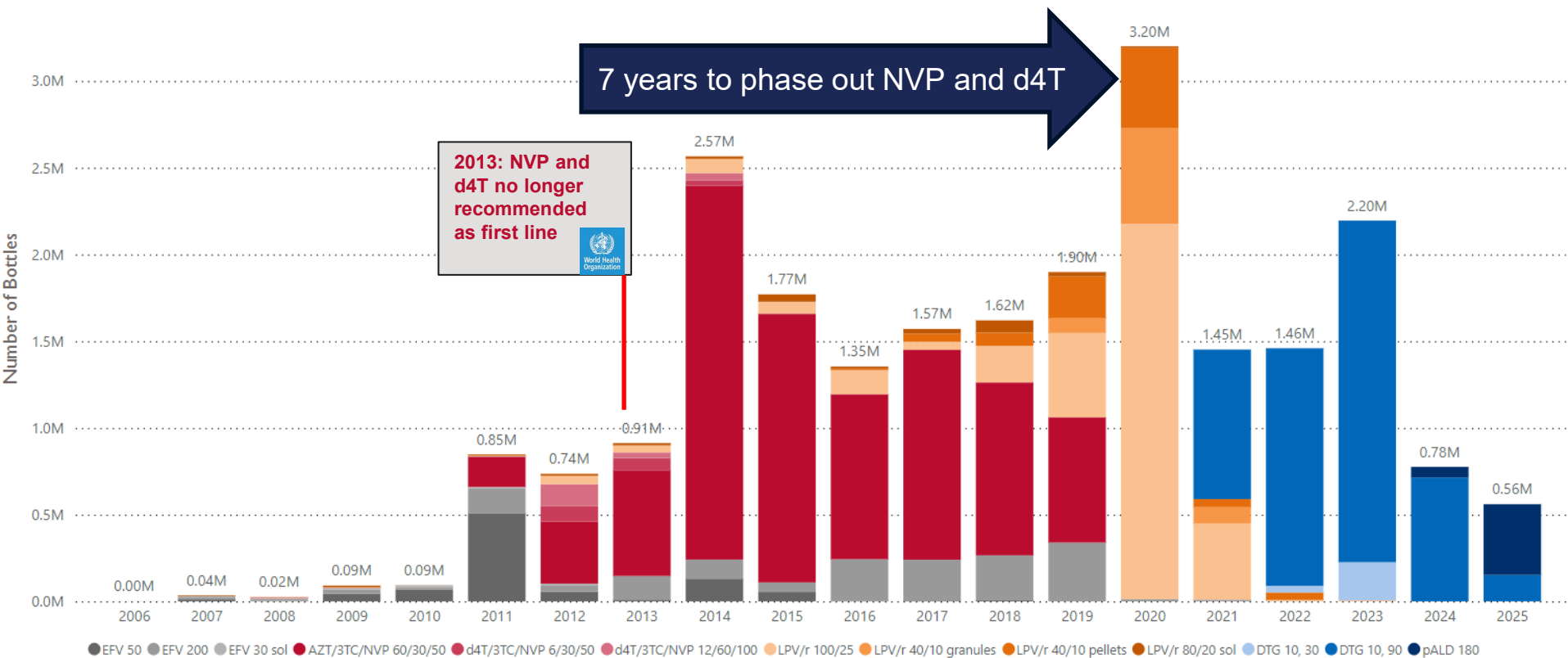
First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only

Number of Bottles



All DTG 10 shown in 90 tab equivalents

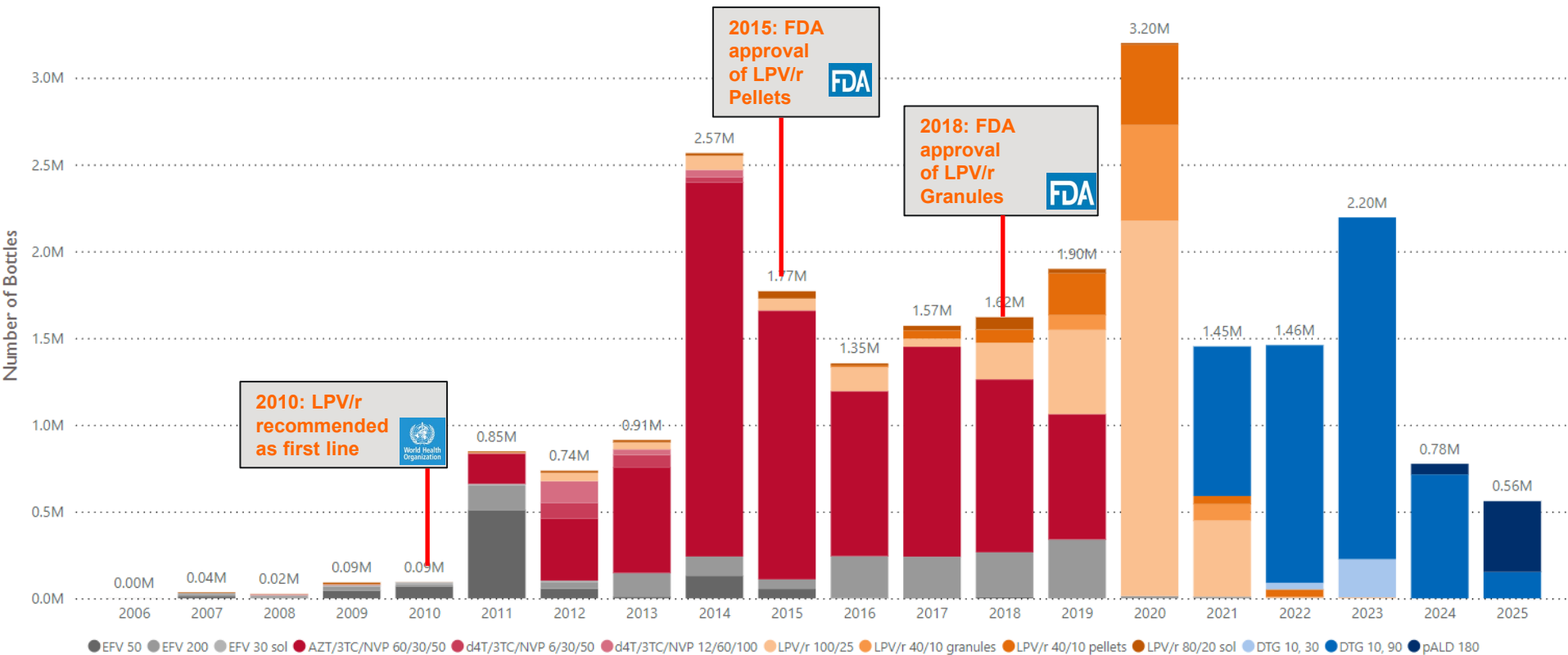
First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only



Source: USAID data on file generated from the Supply Chain Management Systems and Global Health Supply Chain – Procurement Supply Management projects

All DTG 10 shown in 90 tab equivalents

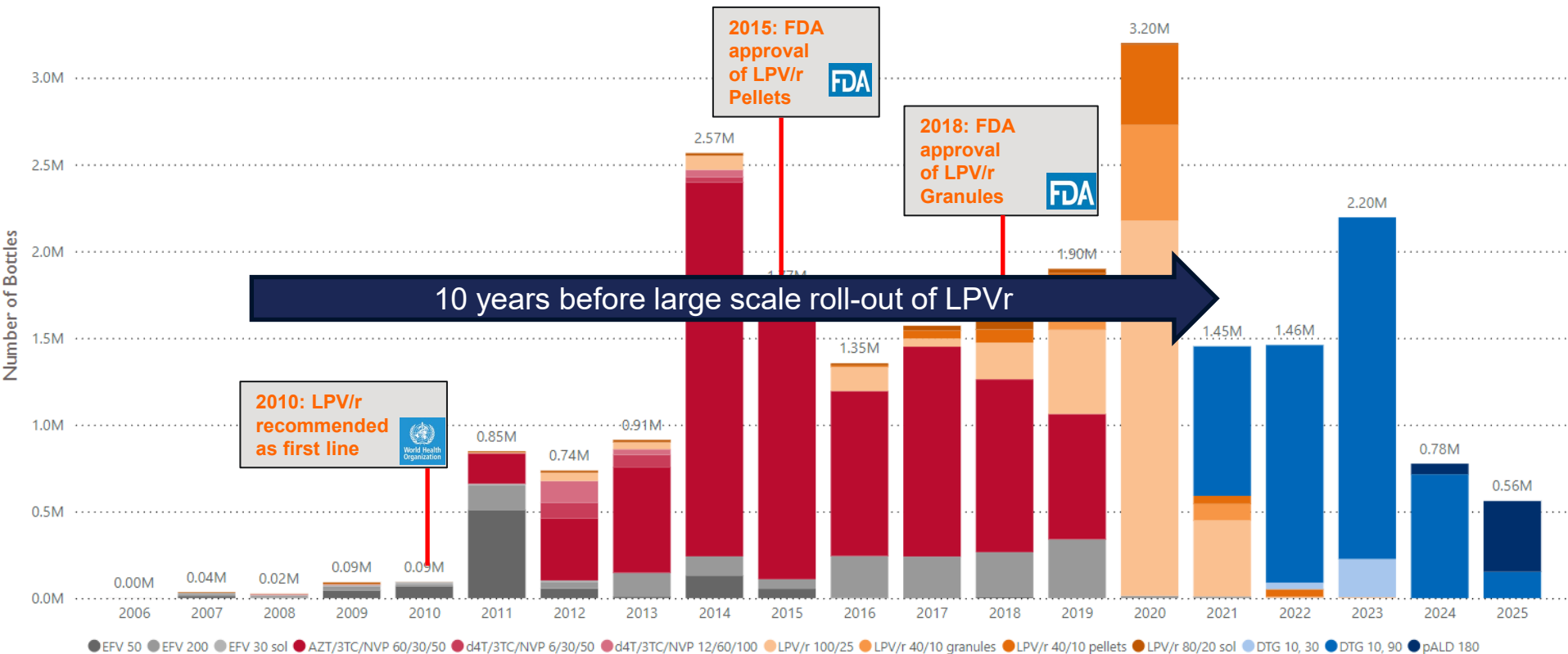
First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only



Source: USAID data on file generated from the Supply Chain Management Systems and Global Health Supply Chain – Procurement Supply Management projects

All DTG 10 shown in 90 tab equivalents

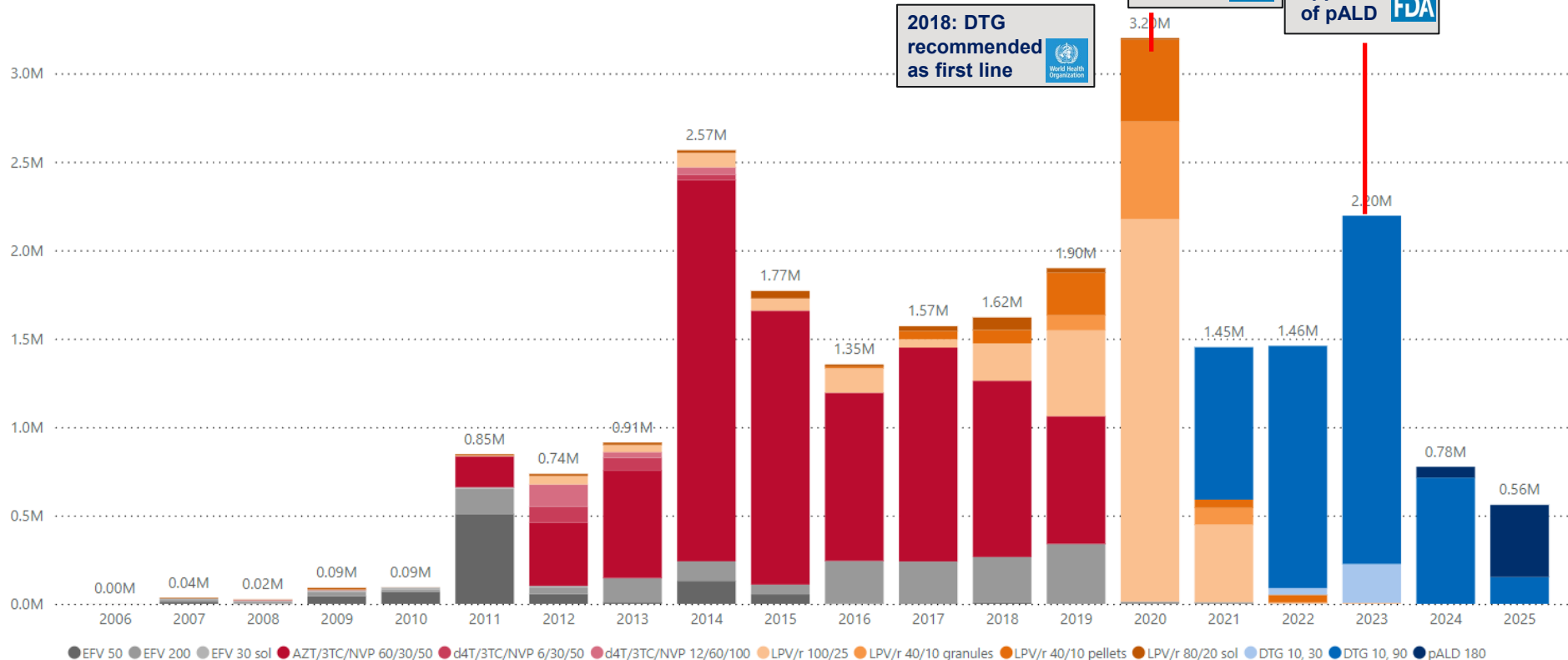
First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only



All DTG 10 shown in 90 tab equivalents

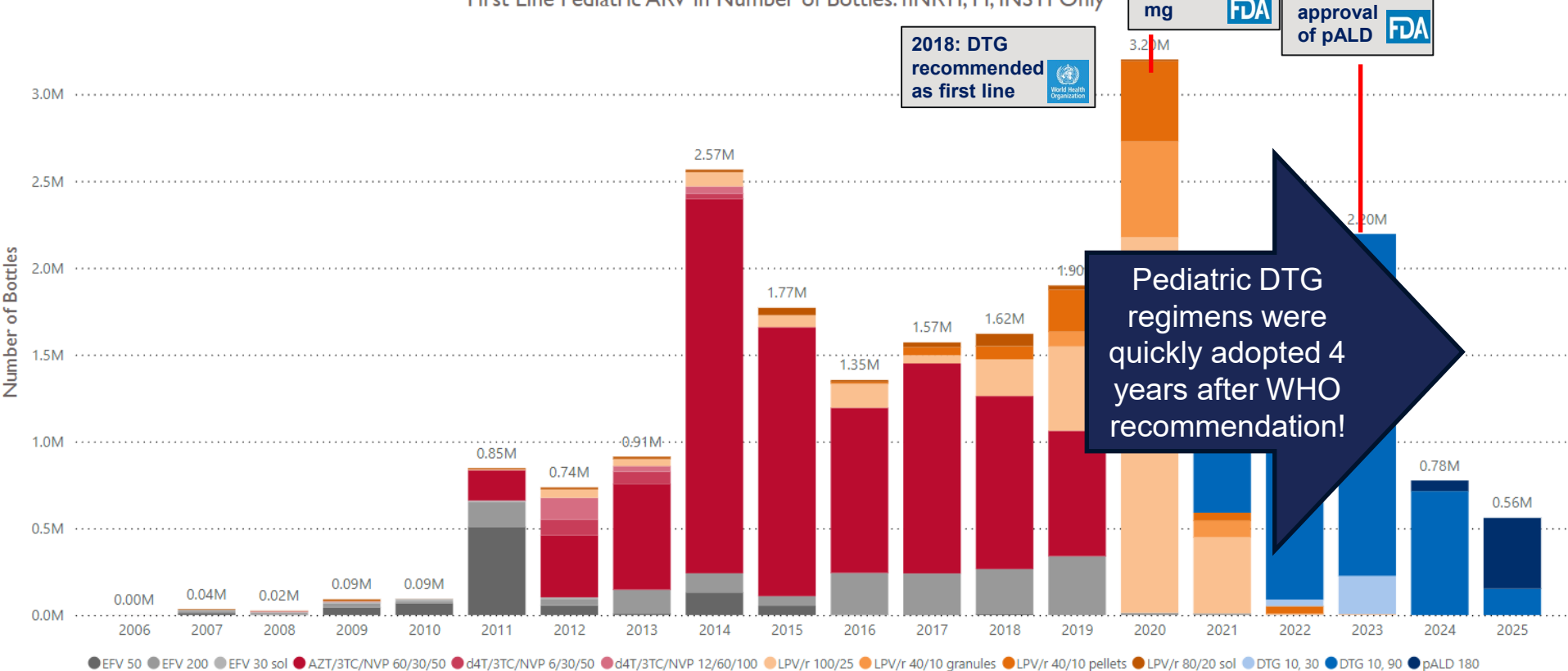
First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only

Number of Bottles



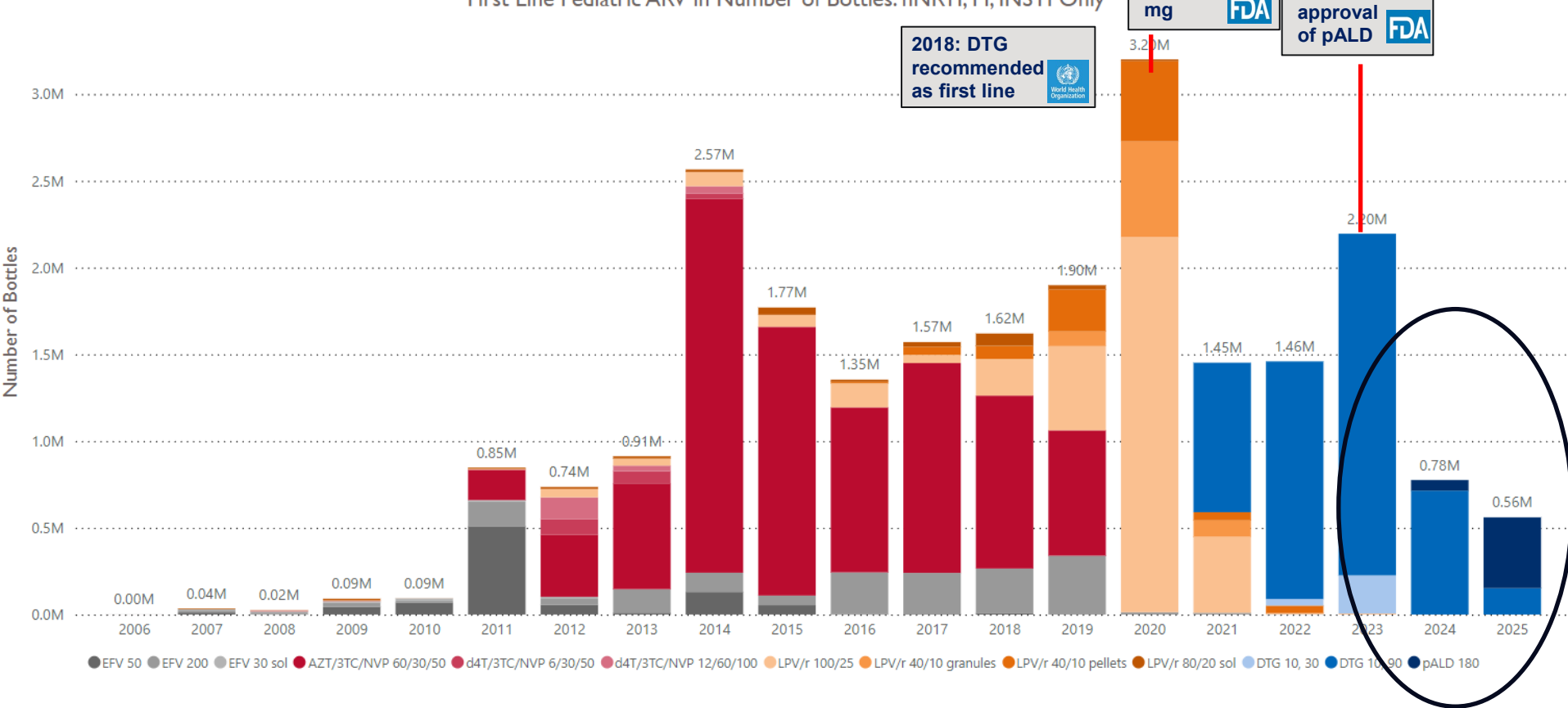
All DTG 10 shown in 90 tab equivalents

First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only



All DTG 10 shown in 90 tab equivalents

First Line Pediatric ARV in Number of Bottles: nNRTI, PI, INSTI Only

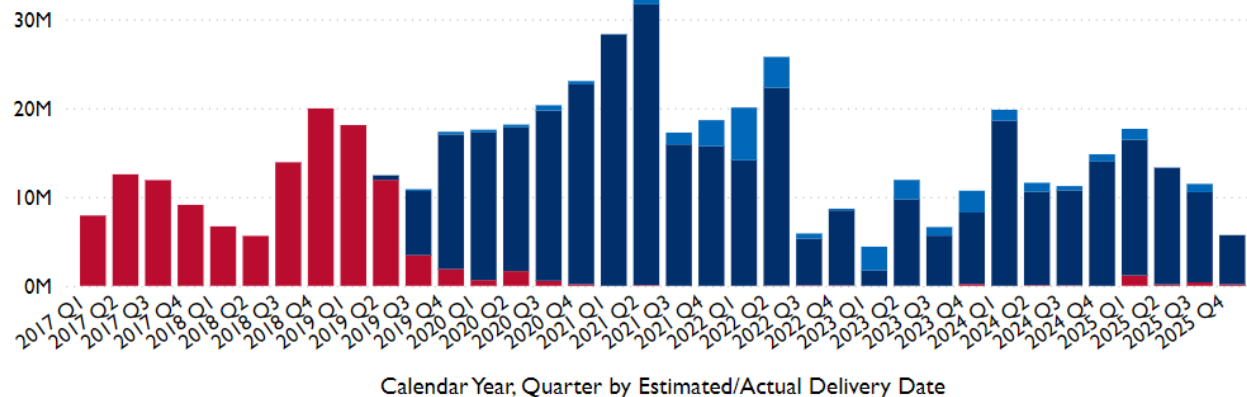


Source: USAID data on file generated from the Supply Chain Management Systems and Global Health Supply Chain – Procurement Supply Management projects

Products Procured by PSM in Equivalent Monthly Treatments Categorized by 1, 3, + 6 Month Product Size

Product Size ● 1 month ● 3 month ● 6 month

Equivalent Monthly Treatments



Adult ARVs Included

TLD

Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 90 Tablets
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 180 Tablets
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 30 Tablets
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 28 Tablets
Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet, 100 Tablets

TAF-ED

Dolutegravir/Emtricitabine/Tenofovir AF 50/200/25 mg Tablet, 90 Tablets
Dolutegravir/Emtricitabine/Tenofovir AF 50/200/25 mg Tablet, 30 Tablets

ALD

Dolutegravir/Abacavir/Lamivudine 50/600/300 mg Tablet, 30 Tablets

TLE

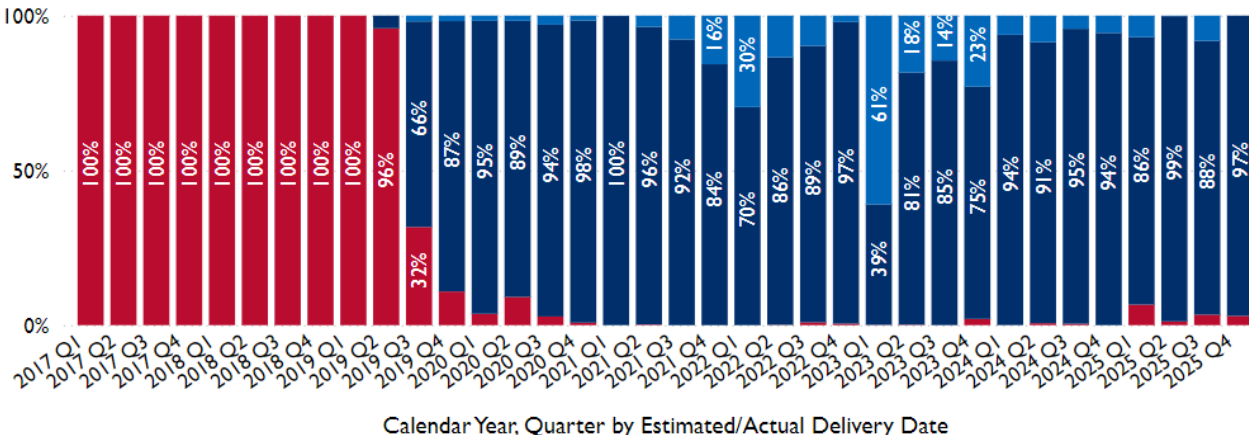
Efavirenz/Lamivudine/Tenofovir DF 400/300/300 mg Tablet, 90 Tablets
Efavirenz/Lamivudine/Tenofovir DF 400/300/300 mg Tablet, 30 Tablets
Efavirenz/Lamivudine/Tenofovir DF 600/300/300 mg Tablet, 90 Tablets
Efavirenz/Lamivudine/Tenofovir DF 600/300/300 mg Tablet, 30 Tablets
Efavirenz/Lamivudine/Tenofovir DF 600/300/300 mg Tablet, 100 Tablets

LZN

Nevirapine/Lamivudine/Zidovudine 200/150/300 mg Tablet, 30 Tablets
Nevirapine/Lamivudine/Zidovudine 200/150/300 mg Tablet, 60 Tablets

Product Size ● 1 month ● 3 month ● 6 month

Equivalent Monthly Treatments Percentage



**PRODUCT
LIFE CYCLE
MANAGEMENT**

1. Timeline for license, research and development, market approval
2. Accessibility for ARVs in clinical trials
3. Reflections on Global Fund Grant Cycle 7
4. Low volume ARVs

SHORT TERM

**Potential expansion of use of
ARVs currently in guidelines**

**ADULT &
ADOLESCENT
USAGE OF
TAF**

1. Contextualization of current market
2. TAF utilization in country, patient subpopulations
3. Emtricitabine vs. lamivudine
4. Pricing of TAF containing formulations

**PREFERRED
PROTEASE
INHIBITOR
OPTIONS**

1. WHO Perspective
2. South Africa Perspective
3. Tanzania Perspective
4. PEPFAR Perspective

LONG TERM

**Approved by USFDA but not
included in current
guidelines**

**LONG ACTING
OPTIONS FOR
TREATMENT**

What is the target product profile for resource limited settings?

PEPFAR ARV Formulation Prioritization March 2017; Latest Revision: November 2024

BACKGROUND

Since the inception of the United States President's Emergency Plan for AIDS Relief (PEPFAR), the United States government has been committed to purchasing safe, effective, quality-assured, and low-cost antiretroviral drugs (ARVs) for people living with HIV. ARVs may be manufactured by brand (innovator) or generic manufacturers.

To help ensure that the United States receives the highest quality ARVs, the U.S. Food and Drug Administration (FDA) utilized existing processes for reviewing and approving New Drug Applications (NDAs) and Abbreviated New Drug Applications (ANDAs) for PEPFAR use. NDAs are submitted for new drugs, while ANDAs are submitted for generic drugs. However, U.S. FDA approval or tentative approval does not guarantee that the ARV is the most needed by PEPFAR. U.S. FDA approval or tentative approval means that the ARV meets all quality standards; however, existing patents and/or market exclusivity prevent the ARV from being used in the United States.

CHECK:
WWW.STATE.GOV/PEPFAR

**EXTRA SLIDES AS TIME
PERMITS**

MIDDLE TERM

**ARVs currently in guidelines,
but being studied for
expanded indications**

**ALTERNATIVE
USES FOR
DOLUTEGRAVIR**

1. DTG for Postnatal Prophylaxis
2. DTG as part of a regimen for Neonatal Treatment

A large teal-colored circular graphic on the left side of the slide, partially cut off by the edge.

AFRICAN

MANUFACTURING

G

PANEL DISCUSSION

TODAY'S PANELISTS



Dr. Dianna Edgil

Deputy Director,
Office of HIV/AIDS,
Supply Chain for
Health Division

USAID



**Ms. Khadija
Jamaloodien**

Chief,
Sector Wide
Procurement,
National Dept of Health,
Rep. of South Africa



**Mr. Jens
Pedersen**

Senior Strategy
Advisor,
Africa CDC



Dr. Perrerr Tosso

Director,
Pharmaceutical
Manufacturing
Programs,
United States
Pharmacopeia



**Ms. Faith
Mangwanya**

Programme Officer
Regional
Manufacturing,
Unitaid



Moderator

Ms. Clarisse Morris

Manager,
Market Shaping and
Partnerships,
The Global Fund

QUESTION 1

Could you briefly describe recent progress you noticed in African manufacturing and some continuing challenges?



QUESTION 2

What do you think manufacturers should be doing to position themselves for the future?

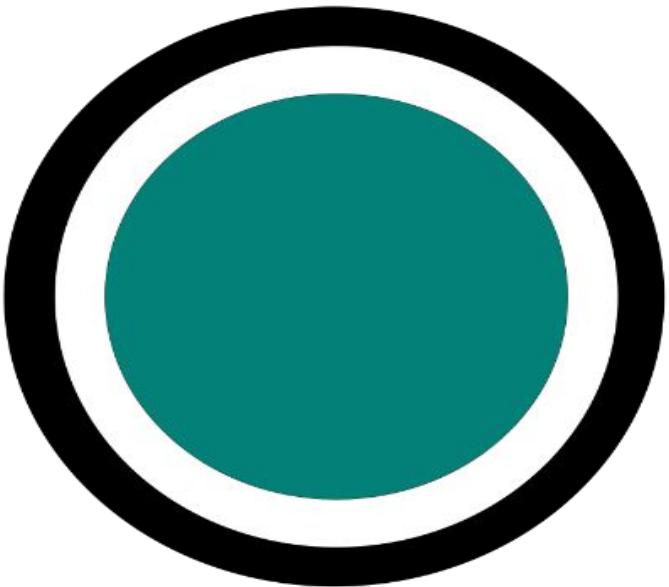


QUESTION 3

Could you name one key shift that would make the ecosystem more favorable for African manufacturing?



AUDIENCE Q & A



THANK YOU!

ASANTENI SANA!

