

# USAID MEDICINES, TECHNOLOGIES, AND PHARMACEUTICAL SERVICES (MTAPS) PROGRAM

*Improved Access. Improved Services. Better Health Outcomes.*



Dr. Armel Poda, infectious physician and university teacher, responds to questions from attendees after a presentation on rational use of antimicrobials in the meeting room of Sanou Souro Teaching Hospital. Photo credit: Hema Yacouba



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## Strengthening Drug and Therapeutics Committee Utilization in Health Facilities

Technical Highlight | October 2022 | Burkina Faso

### Background

Antimicrobial resistance (AMR) is a global threat, with an estimated 700,000 drug-resistant infection-associated deaths annually and an expected 10 million by 2050 if

not addressed.<sup>1</sup> AMR mortality disproportionately affects low- and middle-income countries, with more than four million deaths occurring in Africa each year.<sup>2</sup> The figures could be even higher, particularly in western Sub-Saharan Africa.<sup>3</sup> AMR is also a global health security

<sup>1</sup> The Review on Antimicrobial Resistance. (2014). Antimicrobial resistance: Tackling a crisis for the health and wealth of nations. Available at: [https://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations\\_1.pdf](https://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations_1.pdf)

<sup>2</sup> Dadgostar P. (2019). Antimicrobial resistance: implications and costs. *Infection and drug resistance*, 12, 3903.

<sup>3</sup> Oxford University. (January 20, 2022). An Estimated 1.2 million people died in 2019 from antibiotic-resistant bacterial infections” Available at: <https://www.ox.ac.uk/news/2022-01-20-estimated-12-million-people-died-2019-antibiotic-resistant-bacterial-infections#:~:text=First%20comprehensive%20analysis%20of%20global,role%20in%204.95%20million%20deaths>

threat, given its potential to spread beyond borders.<sup>4</sup> In 2015, the World Health Organization developed the Global Action Plan (GAP) with five strategic objectives to combat AMR.<sup>5</sup> Burkina Faso, like most countries, has since developed an AMR national action plan based on the GAP.

The five-year US Agency for International Development (USAID) Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program supports Burkina Faso's efforts to contain AMR by optimizing the rational use of antimicrobials in human and animal health, including the promotion and strengthening of antimicrobial stewardship (AMS), and facilitating multisectoral coordination (MSC) among key ministries and other stakeholders in accordance with the AMR national action plan.

## Problem Statement

While Burkina Faso has a strategy to ensure the availability of, access to, and appropriate use of quality-assured antimicrobials in the human and health sectors, support to country structures is needed to ensure enforcement and compliance monitoring of existing regulations, policies, and guidelines, including the recently updated standard treatment guidelines and essential medicines list. Enforcement is necessary to address the sale and use of antibiotics without prescription. Also, policies must be developed to address prescription practices that do not always follow national or international guidelines for antibiotic use. Drug and therapeutics committees (DTCs) are policy framing and recommending bodies that advise health care providers and hospital administration on the therapeutic use of medicines. However, not every facility has a DTC. Existing DTCs often suffer from weak ownership by health facilities; lack of financial resources; lack of appropriate staff skills, experience, and dedication; irregular participation of DTC staff in

meetings; and staff turnover. Active staff participation requires more engaged leaders and better motivation. Active DTC members are essential because their advisory nature means DTCs do not have binding force but rely on staff engagement and head officer decisions as their source of influence.

MTaPS follows a sustained, systematic approach to train, coach, and mentor health workers in both the human and animal sectors to be good stewards of antimicrobials and to monitor their practices. Establishing more DTCs in health facilities and capacitating existing ones can help provide supportive supervision in facilities to promote AMS practices.

## Technical Approach

MTaPS worked at the central and health facility levels to help establish DTCs. At the central level, the project worked closely with the General Directorate of Health Supplies/Directorate of Hospital Pharmacy (DPH) as the principal entry point to establish DTCs. MTAps developed training tools and materials with key hospitals and alongside pharmacists from the central level of the Ministry of Health, carried out two sessions to sensitize head officers at pilot hospitals under the leadership of the Ministry of Health General Secretariat, and helped conduct workshops that led the DPH to develop a guideline to orient hospitals on establishing DTCs.

At the facility level, five pilot hospitals were selected in 2020 for MTAps' support. Through the DPH, MTAps supported the pilot hospitals with workshops on DTC establishment and member installation. The next step was to train hospital staff on AMS with MTAps-developed tools. The following year, a second cohort of five facilities was selected for DTC establishment and training, which was completed in one workshop that combined varying hospital and central-level agendas, priorities, and schedules.

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<sup>4</sup> World Health Organization. (2020). 10 global health issues to track in 2021. Available at: <https://www.who.int/news-room/spotlight/10-global-health-issues-to-track-in-2021>

<sup>5</sup> World Health Organization. (2015). Global action plan on antimicrobial resistance. Available at: <https://www.who.int/publications/i/item/9789241509763>

“The exercise of medicine is free, but medical practice within a hospital facility must be oriented and regulated with reference to health care protocols and therapeutic guidelines. To this end, the drug and therapeutics committee [DTC], in its role of health care coordination, allows the provision of better treatments in a cost-efficient manner to all hospital clients. The DTC is thus a body that brings together the competencies needed to produce high quality, accessible, and acceptable health care for all. When functional and productive, it is the guardian of the therapeutical ‘brand’ in hospitals.”

- Dr. Yabre Zakariya, General Director of Health Products Access

## Results and Achievements

MTaPS supported the DPH to establish DTCs in 10 health facilities at the primary (2), secondary (6), and tertiary (2) levels. The facilities included regional hospitals, teaching hospitals, and district centers. The program also worked with the DPH to train 250 DTC members (190 male, 60 female) (table 1).

Table 1: DTC trainees by gender

Health Facilities	Gender		Total
	Male	Female	
CHR de Banfora	23	8	31
CHR de Gaoua	18	3	21
CHR de Ziniare	16	8	24
CHR de Kaya	15	3	18
CHR de Koudougou	15	15	30
CHU-R de Ouahigouya	25	5	30
CHR de Tenkodogo	23	4	27
CMA de Zorgho	14	4	18
CMA de Boulmiougou	13	8	21
CHU Sanou Souro de Bobo-Dioulasso	28	2	30
<b>Total</b>	<b>190</b>	<b>60</b>	<b>250</b>

## Lessons Learned

Following lessons from MTAps’ experience in Burkina Faso could be useful in similar settings:

- A DTC must be the central technical committee for good practices, advocacy, and implementation of therapeutics in a health facility
- Establishing DTCs without consensual leadership, clear rules of procedure, clear terms of reference for participation, and an action plan backed by a budget is insufficient to ensure their functionality and sustainability
- Management support and commitment are essential for the proper functioning of DTCs
- DTC moderators must be knowledgeable about the health system and the clinical and administrative management of a hospital
- The lack of a model DTC impedes experience sharing
- Maturity of DTCs must be accompanied by innovative approaches (e.g., digitization of the health information system)
- Rigorous scientific behavior and transparency in decision making anchor DTCs

## Pathway to Sustainability

The expected country adoption of universal health insurance is an opportunity to highlight the importance of functional DTCs. As such, MTaPS is helping DTC members implement their AMS action plans for FY2022. The program is also helping to build in-country human capacity through its continued support to the AMS online e-learning program and is supporting financial sustainability by assisting with advocacy for domestic funds to be allocated for DTCs.

## Conclusion

MTaPS' assistance to DTCs is helping Burkina Faso improve its capacity in the MSC and AMS components of AMR in both the human and animal sectors. Additional actions could help strengthen DTCs. At the facility level, these could include improved availability of and compliance with standard treatment guidelines; enforcement of an antimicrobial prescribing policy; and improved access to verified quality antimicrobials, in sufficient quantity, with warranted innocuity at an affordable cost to the community. At the central level, additional actions could include a review of text governing hospital administration to highlight DTCs' place, role, and mission; allocation of a budget line for DTCs' functioning and management; and promotion of leadership and continuous quality improvement by highlighting the results from improved service delivery at the health facility level.

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## About USAID MTaPS:

The USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program (2018–2023) enables low- and middle-income countries to strengthen their pharmaceutical systems, which is pivotal to better health outcomes and higher-performing health systems. The program is implemented by a consortium of global and local partners, led by Management Sciences for Health (MSH), a global health nonprofit.

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