



# Malteser International criticises precipitous introduction of new malaria drugs

Cologne/Mahagi - On the occasion of the World Malaria Day, Malteser International criticises the precipitous and badly prepared introduction of new malaria drugs in many parts of the world.

"The introduction of the new drugs is advisable if there are already resistances against the old therapy in the respective country," Dr. Alfred Kinzelbach, Malteser International Regional Coordinator Great Lakes says. But such a step needs to be planned accurately - from the production of the pharmaceuticals to the prescription to the patients.

In the Democratic Republic (DR) of Congo, Kinzelbach is experiencing what happens when these precautions are not taken. Here, the government has ruled that only the new combination therapies on the basis of Artemisinin (ACT) are to be used in the future. In practice, this is almost impossible due to the bad preparation of the measure. A clear sign of the failure: Only very few ACT medicine has up to now reached the east of the DR Congo where Malteser International is working. "Unfortunately, the logistic planning for the introduction of the medicine are completely insufficient. Medical drugs that were already paid are still stocked in big storehouses in the capital Kinshasa. Due to the insufficient logistic, they only rarely reach our project regions," Kinzelbach explains. Furthermore, the new drugs cost almost ten times as much as the conventional ones; next to other problems, this boosts corruption. Finally, the staff in the health centres has not yet been informed sufficiently to introduce the medicine. "Our medical staff has not been sufficiently sensitised for the new therapy and is frustrated by the unreliable supply. Trainings go up in smoke because of the lack of the new medicine. That is why doctors and nurses rather prescribe the familiar treatment," Kinzelbach says. "Our medical staff has not been sufficiently sensitised for the new therapy and is frustrated by the unreliable supply. Trainings go up in smoke because of the lack of the new medicine. That is why doctors and nurses rather prescribe the familiar treatment," Kinzelbach says.

Therefore, Malteser International calls for introducing the new medicine only after a thorough planning and sufficient preparation. "Here in the DR Congo, the introduction - due to the insufficient preparation - costs a lot of money and so far has not shown any perceptible improvement for the population," Kinzelbach summarizes. "Only if the sensitisation of the population, trainings and a long-term secured provision of ACT go hand in hand, the new drugs make sense. Therefore, the introduction should be paused until detailed and viable plans for a nationwide provision have been presented."

Malteser International has been working in the east of the DR Congo for over ten years and provides medical care for about 2.9 million people, including the treatment of malaria patients and the distribution of mosquito nets to the population - mainly to pregnant women and mothers. In 2007 alone, Malteser International together with "World Swim for Malaria" distributed 10,000 mosquito nets in the region of South Kivu. Furthermore, Malteser International trains health staff in the prevention and treatment of malaria.

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