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TECHNICAL BRIEF: TLD TRANSITION

GLOBAL HEALTH SUPPLY CHAIN PROGRAM – TECHNICAL ASSISTANCE

The United States Agency for International Development (USAID)-funded Global Health Supply Chain Program – Technical Assistance (GHSC-TA) provides technical assistance to the South African government to strengthen public health systems and supply chains to advance an AIDS-free generation, increase medicine availability, and contribute to the achievement of universal health coverage.

Tenofovir/Lamivudine/Dolutegravir (TLD) is a new and innovative antiretroviral drug (ARV) therapy used to treat HIV. The Government of South Africa is preparing to transition eligible people living with HIV from Tenofovir/Emtricitabine/Efavirenz (TEE), the fixed dose combination of antiretroviral medicines currently used as first line therapy in the management of the disease, to this exciting new treatment option.

OBJECTIVES

TLD is the preferred treatment regimen for people living with HIV in South Africa because it is a lower-cost, improved alternative to the current regimen. The Government of South Africa has identified eligible “first line” patients to transition from TEE to TLD within a 12-month period once the national ARV treatment guidelines have been finalized.

The roll-out of TLD in South Africa will require successful supply and demand planning to accurately forecast the supply and demand for ARVs across the country so that the government can fulfill patients’ needs while avoiding stock shortages and wastage. When the new ARV guidelines are approved, provincial health care professionals will begin transitioning patients to TLD, following plans that are tailored to each province’s unique context.

Once eligible people living with HIV in South Africa are transitioned to TLD, they will receive improved treatment at a lower cost, contributing to their overall health and South Africa’s progress towards an AIDS-free generation.

APPROACH AND KEY ACTIVITIES

GHSC-TA is working closely with the National Department of Health (NDOH) and other implementing partners to support the transition to TLD in South Africa. GHSC-TA is assisting the NDOH with activities related to the supply chain by developing a high-level supply and demand model, assisting with the provincial roll-out of the transition, and implementing a change management plan. GHSC-TA will also assist with the NDOH’s communication efforts and work with NDOH to develop a national transition plan to introduce TLD to patients.

The supply and demand model was developed through multi-stakeholder collaboration between Pharmaceutical Services and the Strategic Health Program as the model that will assist provinces in transitioning eligible patients to the new regimen. A statistical baseline forecast, which estimates the future quantities of medicine required to meet patient demand, is at the heart of the demand model. Factors such as epidemiological data, standard treatment guidelines, and the number and location of facilities and planned campaigns to introduce TLD were used to enrich the forecast. The supply model will inform ARV suppliers of the estimated stock requirements and quantify the product replenishment cycle so that they can make sure that sufficient stock is available to satisfy demand during the transition.

GHSC-TA also developed a TLD dashboard to track medicine availability of TLD and TEE across all provinces. The final demand estimates will be included in the dashboard to track actual patient transition against the provincial estimates. The dashboard also tracks availability of tuberculosis (TB) preventative therapy, contraceptives, and Dolutegravir 50mg, the medicine that will be used as a booster for patients who contract TB while on TLD.

GHSC-TA and NDOH identified champions within provincial Pharmaceutical Services and the Health Programs to assist in the TLD transition. These points of contact will play an important role in supporting provincial stakeholders in the transition. GHSC-TA has also supported the NDOH by holding frequent interactions with ARV suppliers to ensure they are prepared for the demand they will receive for TLD and TEE during the transition. This preparation will help to minimize stock wastage and avoid potential stock-outs of both products.

The guidelines to support the TLD transition will receive final approval from the National Health Council by September 2019, at which point GHSC-TA and the NDOH will begin assisting provincial stakeholders in commencing the transition.

EXPECTED OUTCOMES

GHSC-TA's technical assistance in the TLD transition will result in the following improvements, strengthening the health supply chain in South Africa:

- Increased understanding among provincial stakeholders of the transition to TLD.
- Provincial buy-in on TLD transition plans.
- Increased understanding among patients of the new ARV treatment regimen as a result of the Provincial Training and Communication Plan.
- Targeted number of patients transitioned from TEE to TLD in line with global 90-90-90 treatment targets.
- Proactive management of the supply of TLD and TEE to avoid shortages.
- Minimal wastage of TLD and TEE.
- Development of the NDOH TLD Transition Guideline which can also be adapted to be used as a playbook to support future regimen changes.

LESSONS LEARNED

Multi-stakeholder collaboration is crucial to the success of the transition. In addition to the appointment of provincial champions, a Provincial Steering Committee was established to provide high-level plans for engaging and working with all stakeholders in successfully providing guidance and oversight on initiatives and activities related to the TLD transition.

Accurate data is critical in the development of accurate demand and supply plans. Where reliable data was not available, high-level assumptions were made.

It is important that both national and provincial stakeholders play a key role in the demand planning process and assist in enriching the forecast to arrive at an informed result.