

Summary report on the

**Workshop on sharing findings
and recommendations on the
management of sexual and
reproductive health essential
medicines for the implementation
of national sexual and
reproductive health guidelines**

WHO-EM/WRH/113/E

Virtual meeting
24 February 2021



REGIONAL OFFICE FOR THE

**World Health
Organization**

Eastern Mediterranean

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Contents

| | | |
|----|------------------------------|---|
| 1. | Introduction..... | 1 |
| 2. | Summary of discussions | 2 |
| 3. | Conclusions..... | 4 |
| 4. | Recommendations..... | 4 |
| 5. | Next steps..... | 5 |

1. Introduction

A virtual workshop on sharing findings and recommendations on the management of sexual and reproductive health (SRH) essential medicines for the implementation of national SRH guidelines was held by the WHO Regional Office for the Eastern Mediterranean on 24 February 2021.

The specific objectives of the workshop were to:

- share the assessment methodology and findings of studies on SRH essential medicines in Afghanistan, Iraq, Lebanon, Morocco and Pakistan that were conducted in 2020;
- determine the main strengths and challenges for securing the availability of SRH essential medicines at health services; and
- recommend key tools, approaches and measures for better management and security of SRH essential medicines at health facilities.

The event was attended by 84 participants from 10 countries, including Afghanistan, Iraq, Lebanon, Libya, Morocco, occupied Palestinian territory, Pakistan, Somalia, Sudan and Tunisia, as well as WHO technical staff from the WHO Regional Office and WHO headquarters, representing the Reproductive and Maternal Health, Access To Medicines and Health Technologies, and Sexual and Reproductive Health and Rights units.

The workshop was inaugurated by Dr Maha El Adawy, Director of the Healthier Populations department at the WHO Regional Office, who explained that the implementation of WHO sexual and reproductive health guidelines and recommendations is highly dependent on the availability of SRH essential medicines. Dr El Adawy requested countries to develop and update their essential medicine lists based on the WHO global Essential Medicine List, according to the changing epidemiology and requirements at country level.

2. Summary of discussions

Dr Karima Gholbzouri, Regional Adviser for Reproductive and Maternal Health at the WHO Regional Office, emphasized the importance of having SRH essential medicine lists to ensure good quality SRH services in health facilities. Dr Gholbzouri noted that including SRH essential medicines in the national list would not automatically ensure their availability at health facility level.

Dr Houda Langar, Regional Adviser for Access to Medicines and Health Technologies at the WHO Regional Office, explained that the inclusion of drugs in essential medicines lists provides a strong justification for making them available in the public sector. Dr Langar highlighted that functioning drug regulatory authorities and pharmacovigilance systems are essential for ensuring the safety and quality of medicines.

Dr Adi Al Nuseirat, Technical Officer for Access to Pharmaceuticals at the WHO Regional Office, provided a general overview of access to medicines in the Region. Dr Al Nuseirat explained the pharmaceutical supply chain and presented the global and the regional situation for essential medicines. He identified the main challenges in the Region regarding access to and availability of quality medicines as being: deficiencies in implementation of national medicine policies; weak financial planning and management for essential medicines; price variations between countries for identical products; inefficient supply management and procurement systems; weak drug regulatory mechanisms; irresponsible use of medicines; and limited production of medicines within the Region.

Professor Rachid Bezaoui, Director of the WHO Collaborating Centre for Reproductive Health Research and Training in Rabat, Morocco, presented the methodology and assessment tool used for the SRH essential medicines assessment. Professor Bezaoui outlined the

development of a comprehensive list of essential SRH medicines, based on WHO SRH guidelines covering the reproductive and maternal health continuum of care. He also explained the use of the SRH essential medicines list digital tool to monitor the availability of SRH drugs at national and subnational levels.

All participating countries confirmed the existence of drug regulatory and monitoring mechanisms at national level, but noted the persistence of major challenges hindering the availability of SRH essential medicines in countries.

The following challenges were identified related to SRH essential medicines.

- Some SRH medicines recommended in WHO SRH guidelines are not included in national SRH guidelines.
- Some medicines included in national SRH guidelines are not included in national essential medicine lists and/or medicine procurement lists, which hampers implementation of the guidelines.
- Some essential SRH medicines that are included in national essential medicines and procurement lists are not mentioned in national SRH guidelines.
- Deficiencies in drug regulatory systems that affect the quality of medicines available in the market and health institutions and weaken control over the influx of unnecessary and low-quality medicines into countries.
- Ineffective pharmacovigilance systems for SRH medicines, especially for modern contraceptives, that affect the safety of medicines, given the essential role played by pharmacovigilance systems in monitoring and raising awareness of adverse drug reactions and ensuring the safety and quality of medicines.
- Limited adoption of medicine forecasting tools to estimate drug requirements at country level.

During the discussion, the country teams agreed on the importance of addressing the identified gaps and ensuring an updated SRH essential medicines list in line with WHO recommendations.

3. Conclusions

Inclusion of SRH essential medicines in national essential medicine and procurement lists is crucial for ensuring the availability of SRH medicines at country level. Efficient and functioning drug regulatory and pharmacovigilance systems are needed in countries to ensure the quality and safety of medicines.

4. Recommendations

To Member States

1. Review and revise national SRH guidelines for the inclusion of evidence-based WHO SRH recommendations.
2. Ensure that medicines prescribed in national SRH guidelines are included in national essential medicines lists, procurement lists and medicine forecasting tools.
3. Streamline the registration of SRH medicines with drug regulatory authorities.
4. Strengthen pharmacovigilance systems to ensure the quality of medicines.

To WHO

5. Undertake advocacy with the relevant national authorities to ensure that essential SRH medicines are included in national essential medicines and procurement lists.

6. Ensure coordination between WHO headquarters, country offices and the Regional Office so that the necessary technical support is provided to countries.

5. Next steps

WHO country offices

- Disseminate the findings of the SRH essential medicines list assessment at national level multi-stakeholder workshops and through publications.
- Promote the inclusion of “missing medicines” in SRH essential medicine and procurement lists.
- Initiate discussions with drug regulatory authorities to ensure the registration of medicines.

WHO headquarters and Regional Office

- Provide the necessary technical support to countries to implement recommendations of the assessment.



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