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## **African countries are working together to enhance medicine use**

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**Abstract:** Growing burden of infectious and NCDs across Africa, e.g. 70% of world's HIV patients live in sub-Saharan Africa and 30 to 45% of adults have hypertension. This requires groups to collaborate. This is happening, e.g. SAHTAS, PharfA and MURIA. MURIA is researching antibiotic use, adherence to medicines and strengthening DTCs. This should continue to optimise medicine use and scarce resources.

**Introduction:** The socioeconomic burden of diseases is increasing in Africa. For instance in 2011, 70% of the world's HIV population resided in sub-Saharan Africa. There are also growing rates of AMR, which necessitates newer more expensive antibiotics adding to costs. There is also a growing burden of NCDs, 3 out of 4 patients with hypertension currently live in LMICs, with prevalence rates up to 30% to 45% among adults in Africa. Alongside this, up to 70% of total healthcare expenditure is spent on medicines in LMICs; much of this out-of-pocket. Consequently, an urgent need to strengthen collaborative research to improve medicine use.

**Method:** Summary of groups working together in Africa including the Medicines Utilisation Research in Africa (MURIA) group.

**Results:** African Strategies for Health identifies and advocates best practices, as well as works with others to develop sustainable solutions. Pharmacology for Africa (PharfA) organises and promotes pharmacology on the African continent, including research in clinical pharmacology, alongside the IUPHAR sub-division. ISPOR Africa co-ordinates activities from the different African country chapters. SAHTAS is a scientific and professional society for all those who produce, use, or encounter HTA in Southern Africa, and WHO International and Regional groups are improving antibiotic drug utilisation capabilities in Africa. The MURIA group was established in 2015 [1]. Ongoing collaborative research includes (i) initiatives to optimise antibiotic use; (ii) methods to enhance adherence to anti-infective prescribing guidance, (iii) approaches to improve adherence to HIV and NCDs; (iv) researching current anti-hypertensive and anti-diabetes medicines utilisation patterns and knowledge; (v) approaches to enhance DTC activities, and (vi) strengthening medicine utilisation capabilities [2,3]. These activities have already strengthened research ties across Africa.

**Conclusion:** A number of groups are already working across Africa to enhance appropriate medicine use, and should continue. Ongoing MURIA activities include antibiotic point-prevalence studies, ongoing research into infectious diseases, NCDs and DTCs including adherence as well as the third workshop and symposium in Namibia in 2017.

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