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New global subsidy for malaria medicines must ensure quality of care

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A new subsidy designed to increase access to life-saving antiretrovirals must remain focused on quality patient care if it is to succeed, argues Tido von Schoen-Angerer and colleagues in this week's open access journal *PLoS Medicine*.

The subsidy, called the Affordable Medicines Facility-malaria (AMFm), will be rolled out in 2009 and is designed to address concerns of poor access to artemisinin combination therapies (ACTs) for malaria, and fears about growing resistance to the drugs. Dr. von Schoen-Angerer and colleagues cite a recent household survey across 18 African countries that found only about 3% of children under five years with fever had received an ACT.

The authors say that in order to enhance quality of care, the AMFm should adopt policies to exclusively fund fixed dose combinations, withhold support for ineffective combinations, and support wider adoption of rapid diagnostic tests (RDTs). The authors demonstrate how generic competition has reduced the price of antimalarials over time.

"The AMFm is an innovative but untested global initiative with the potential for both positive and unintended consequences for health," say the authors. "Keeping the focus on quality care—through patient-centered policies on drug choice, diagnostics, delivery, and M&E—will help the AMFm to meet the long unfulfilled promise of artemisinin for the millions who continue to suffer from malaria today."

The Affordable Medicines Facility-malaria (AMFm), a new global health initiative, aims to address inadequate access to ACTs for treating P. falciparum malaria by subsidizing producer prices. First proposed in 2004, the facility aims to lower end-user prices to the level of older antimalarials in order to save lives by making ACTs more affordable and to delay resistance to artemisinin derivatives by driving artemisinin monotherapy and substandard antimalarials out of the market. The AMFm is hosted by the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and 11 countries have been invited to participate in the initial phase: Benin, Cambodia, Ghana, Kenya, Madagascar, Niger, Nigeria, Rwanda, Senegal, Tanzania, and Uganda.

More information: Moon S, Perez Casas C, Kindermans J-M, de Smet M, von Schoen-Angerer T (2009) Focusing on Quality Patient Care in the New Global Subsidy for Malaria Medicines. *PLoS Med* 6(7): e1000106. doi:10.1371/journal.pmed.1000106

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