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## Prospects and challenges of providing pharmacovigilance services in resource limited countries

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**A**dverse drug reactions (ADRs) were the 4th to 6th cause of death in the United States of America (USA) in 1994. In other countries, ADRs have increased the cost of providing health care and are complicating the management of co-morbidities like HIV/AIDS and TB. Thus, in many western countries, pharmacovigilance (PV) has been instituted as an effective public health measure to protect the general population from the harmful consequences of ADRs. In Sweden, France and Italy, reporting of ADRs is compulsory. In the USA and more recently in some other countries, patients can also report directly to the spontaneous reporting system (SRS). In developing and resource limited countries, the PV systems are emerging; in recent times, the factors that have promoted the development and strengthening of pharmacovigilance in the developed countries are emerging in the developing countries. For instance, having a national policy on PV and a strong governmental commitment, a robust drug manufacturing sector, a vibrant health system with the potential to track and recall suspected drugs from the market, a strong central regulatory system working in collaboration with the global pharmacovigilance center and an enlightened work force, are predictors of an effective PV system. In this presentation, we shall highlight the emergence of these factors using the case of Nigeria to demonstrate the prospects of PV in resources limited countries. We shall also unveil the challenges that have to be addressed in order to strengthen PV in poor countries.

### Biography

Avong is a public health pharmacist, implementer of public health initiatives and a certified operational researcher. He holds a Bachelor of Pharmacy (BPharm) from the Ahmadu Bello University, Zaria, Nigeria and a Master of Public Health (MPH) from the University of the Western Cape, South Africa. He is also in the process of pursuing a PhD in Pharmacovigilance and Pharmaco-epidemiology. In 2009, he inspired the setting-up of the spontaneous reporting system (SRS) in two public health programs (ART and MDRTB) and supervised the collection and analysis of over 2000 individual case reports (ICRs) from these programs. He has published papers in ADRs and adherence to anti-retroviral therapy (ART). Furthermore, he has peer-reviewed many manuscripts and participated in several international researches like the START study, while contributing to the development of the current "Integrated National Guidelines for HIV Prevention Treatment and Care in Nigeria". As the head of the Pharmacy Division and Associate Director with the Institute of Human Virology, Nigeria (IHVN) – a US PEPFAR and Global Fund implementing partner with over 200,000 HIV/AIDS patients in care, he oversees the delivery of pharmaceutical care service in all the grants. He served as the liaison officer between the Martindale Pharmaceutical Limited, UK and the Federal Government of Nigeria for the importation of Narcotics for the public sector in 2003/2004. His current interest is promoting pharmacovigilance in public health programs.

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