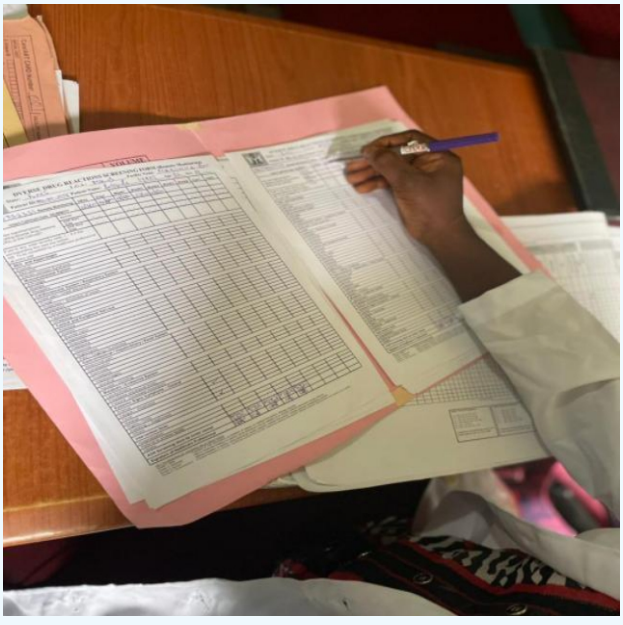
Enhanced Adverse Drug Reaction Monitoring and Reporting

Adverse drug reactions are major contributors to non-adherence, discontinuation or changes in antiretroviral therapy regimens among people living with HIV. The essence of monitoring and reporting is to ensure medication safety among the clients as well as ensure that there are no adverse events leading to non-adherence to treatment and, thus, affect Patients' level of virologic suppression.



APIN introduced an innovative strategy of enhanced adverse drug reaction monitoring of clients across supported facilities to boost reporting and ensure that clients are free of any harm from the medications, thereby ensuring that good adherence levels are maintained.

In contrast to the normal practice of waiting for patients to call or return to the clinic for active pharmacovigilance, this innovative strategy engaged pharmacy focal persons and case management team volunteers to proactively follow up on the clients after ART initiation. Once a client is initiated on treatment the first follow-up is done within 24 hours and subsequent follow-ups at 72 hours, after 1 week, 1 month, 3 months, 6 months and then after 1 year of being on treatment for

the different categories of clients across supported facilities. All cases of ADR are reported to NAFDAC using the Individual case safety report form (ICSRF) via the E-reporting platform (med safety app).

The implementation of this innovative approach has led to an improved reporting of ADR among clients and across facilities. More facilities have become involved in ADR surveillance and there is greater awareness and drastic improvement in ADR reporting among healthcare workers. Overall, 2,272 ICSRFs were collated and reported across APIN-supported facilities from the commencement of the ADR monitoring system in April 2018 to June 2022. More adverse drug reports were reported pre- Tenofovir + Lamivudine + Dolutegravir era but with the introduction of TLD fewer complaints by clients have been observed.

> ''I am happy APIN is represented at this training; I want to specially thank APIN and acknowledge their unrelenting effort in submitting documented adverse drug reactions report. ADR forms submitted by APIN are what we are using for hands-on-practice in this training''
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> **Pharm Uzoma Atu**
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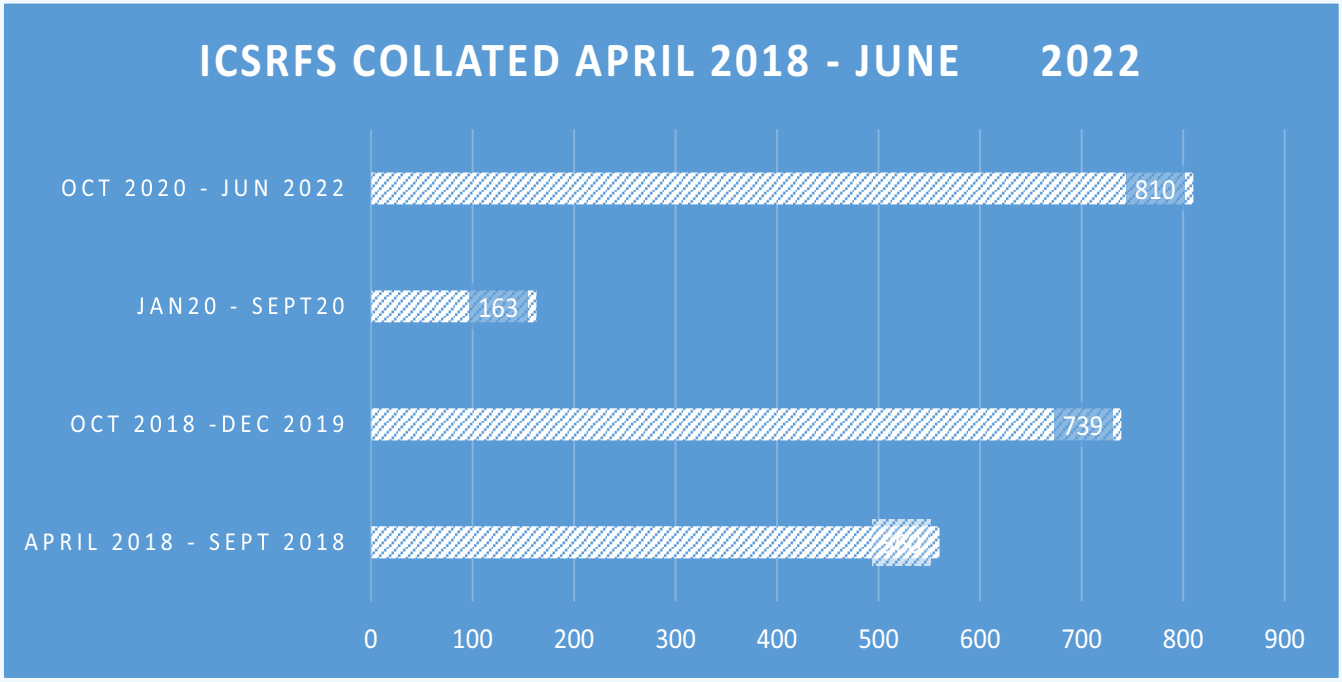
> *Logistics Unit FMOH/NASCP (at the Training of Trainers on pharmacovigilance Enugu)*



Bar chart of number of ICSRFs collated between April 2018 to June 2022.