



Boosting quality diagnostics could give Africa better health

Africa CDC has launched a new initiative aimed at boosting access to essential diagnostics across the continent. Munyaradzi Makoni reports.



Thierry Rogier/Reuters

The Africa Centres for Disease Control and Prevention has launched, on Nov 16, the Africa Collaborative Initiative to Advance Diagnostics (AFCAD). AFCAD's partnerships include the African Society for Laboratory Medicine, Institut de Recherche en Santé, de Surveillance Epidémiologique et de Formation, WHO-Africa, Clinton Health Access Initiative, African Field Epidemiology Network, and UNITAID.

The role of AFCAD is to support efforts to achieve equitable access of up to 80% coverage to the WHO essential package of health that includes essential diagnostics. The initiative will focus on eliminating or eradicating diseases prioritised by global health normative agencies—such as ending HIV epidemics, multiresistant tuberculosis, malaria, viral hepatitis, cervical cancer, and neglected tropical diseases; early detection and prevention of antimicrobial resistance; reduction of barriers to early detection, prevention, and management of non-communicable diseases; and institution of early warning systems to ensuring timely detection and diagnosis of epidemic-prone diseases.

The AFCAD will prioritise approaches that accelerate regulation to facilitate timely and wide access to essential diagnostics, market interventions to improve affordability, communication and dissemination of data supporting evidence-based improvement of diagnostic services, and advocacy for appropriate investment in diagnostics.

The implementation of diagnostic tests in Africa presents challenges, says Heidi Albert, head of the Foundation for Innovative New Diagnostics in South Africa. Within ministries of health, laboratory services are often not prioritised, and their management can be split across various departments, resulting in lack

of dedicated budgeting, planning and accountability for diagnostics. Funding is highly dependent on donors, and substantial gaps exist in supply chain management and equipment maintenance.

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many people want medicines, not a test", he told *The Lancet*, adding that the implementation of new diagnostic tools is complicated by a general lack of regulations, and that many diagnostics aren't built for local conditions and consequently fail during implementation.

The initiative is thus well placed to tackle issues that cut across diseases and require high-level interventions, such as regulation and market interventions at national and regional levels, he says. "Compiling and analysing evidence on diagnostic network strengthening and making this available in readily digestible format to countries will be equally valuable. Many countries do not have local capacity for this, and it will be more efficient to do this on a regional basis", says Albert.

Many have limited access to treatments, partly because of unavailable or invasive diagnostics, says Monique Wasunna, director of Drugs for Neglected Diseases Initiative for Africa based in Nairobi, Kenya. "Diagnostics for diseases such as leishmaniasis and mycetoma are invasive and are sometimes non-existent in rural health facilities where these diseases are found. Often, this leads to misdiagnosis", Wasunna told *The*

Lancet. Research for better diagnostic tools should be integrated into research for new treatments for non-communicable diseases to ensure that it remains a priority, she says, for which the AFCAD should make a difference. "If African Governments, institutions, experts, civil society embrace the initiative and work together to overcome the existing barriers, the neglected populations in Africa will see the light at the end of the tunnel sooner than later", says Wasunna.

Any initiative focusing on laboratory services in Africa is a good thing, says Kathleen England, senior tuberculosis diagnostics advisor at Médecins Sans Frontières. Although NGOs and donors are involved in this, bigger issues related to lab services need government leadership and domestic funds or domestic driven action, she adds. "Some elements that need local attention are infrastructure, continuous power to facilities, labs with adequate benches and workspaces for instrumentation, temperature and humidity controls, systems to support testing such as non-paper based data management, specimen referral, waste disposal, and the supply chain", England says.

Staffing is plagued with attrition, incompetency, unfair wages, and no professional growth opportunities. She calls on academic institutions to develop degrees to provide the technical competency needed for newer technologies and to build stronger management capacities to become independent of international teaching.

"This is a good initiative, but until we get high level government officials to spend more on health care in general, I am not sure the tide will turn, at least not as rapidly as we would hope or need", England told *The Lancet*.

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