The Past, the Present and the Future that GS1 Healthcare Standards will deliver for the African Continent

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Tunde Odunlami, CEO – GS1 Nigeria

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GS1 in numbers

- **112 local member organisations**
- **1.5 million companies around** use GS1 standards
- **Over 100 million products** carry GS1 barcodes around the world
- **More than 5 billion GS1 barcodes** are scanned every day
GS1 – the global language of business

GS1 is a global standards organisation

- Neutral and not-for-profit
- User-driven and governed
- Global and local
- Inclusive and collaborative
The GS1 barcode: “one of the 50 things that made the world economy”......BBC
Key industries served

- Retail
- Healthcare
- Transport & Logistics
- Foodservice
- Technical Industries
  - CPG/Grocery
  - Apparel
  - Fresh Foods
  - General Merchandise
# The Past outlook of Healthcare in Africa

## Inadequate funding and poor regulation
- Low funding by government yet increasing needs for essential health commodities
- Poor regulations yet more threats of huge population
- With population of 1.256 billion in 2017 against the world population of 7.2 billion, Africa population at 2017 represents 17.4 percent of the world population.
- By 2050, Wikipedia estimates an increase of 1.3 billion in Africa, 0.9 billion in Asia and 0.2 billion for the rest of the world

## Poor pipeline monitoring and control
- Counterfeiting on the increase
- Non availability of heath commodities when needed

## Ineffective warehousing and distribution
- Ineffective warehousing system
- Defective or poor distribution channel and system
- Deficient last mile delivery protocols

## No visibility of commodities
- No transparency among stakeholders
- No networking among supply chain partners
- No information exchange and slow/late decision-making
### Present status of healthcare

<table>
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<tr>
<th>Visibility of commodities of commodities in the pipeline, increasing threats of counterfeiting</th>
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<tr>
<td>Discrepancies between reported system data and physical data on consumption and storage leading to stock outs or over stocks</td>
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<tr>
<td>No interoperability of system for necessary exchange of information and for proper decision-making</td>
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<td>Disjointed links and transparency between upstream, mid-stream and downstream giving false data for analysis</td>
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<th>Inadequate health worker capacity to support data reporting and reluctance to do so</th>
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<td>Poor gathering of data along side commodities flow in the supply chain</td>
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<td>Avoidable wastages, expiration and poor warehousing and leading to inaccurate quantification, selection, and procurement</td>
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Counterfeit medical goods can form up to 30% of the market in parts of Asia, Africa and Latin America.

>1 million people die each year from counterfeit drugs.

Tens of billions of dollars’ worth of counterfeit drugs could be blocked with help of standards.

Millions of patients at risk for adverse drug events.

$160-280 billion lost due to inefficiencies and errors.
The future African Healthcare we love to see

Integrated Data Capture

- Data Capture
- Visibility
- Authentication
- End-to-end Traceability
- Recall readiness
- Transparency
- Trust
- Patient-safety
- Improved regulation by government
- Increased revenue for all parties

Data enabled healthcare system at every point in the chain. This made possible GS1 identification standards for the healthcare industry.
Healthcare
Traceability benefits

- Improve patient safety
- Prevent counterfeits
- Achieve supply chain efficiency, visibility and accurate recalls
Increasing request for traceability

- Regulations or trading partner requirements in many countries
- Driven by the need to increase patient safety, prevent counterfeit product entering the market
- For shared, enhanced supply chain control

Argentina, European Union, South Korea, Turkey, United States
Africa must rise up to the global progress

Progress in the Middle East

- UAE: innovated medicine pack recommendations
- EGYPT: decree issued on national track and trace system requiring GS1 standards
- JORDAN: Publication of Jordan Food & Drug Administration (JFDA) Instructions on drug traceability with GS1 standard
- SAUDI ARABIA: Identification and serialization of medicinal products using GS1 standard
- PAKISTAN: Drug Regulatory Authority is developing policy and regulation for GS1 standards adoption.

Progress in Traceability regulations in Europe

- Counterfeit medication is a growing reality today in all parts of the world
- EU- Falsified Medicines Directive Deadlines for implementation of the requirements will be on 9 February 2019 (2025 for Belgium, Italy, Greece). Medicinal product to carry Unique Identification number, Batch/Lot number, Expiry date, Serial number, in a DataMatrix

UDI (Unique Device Identification)

- Over 500,000 devices have been registered to the U.S. FDA Global UDI Database (GUDID) and 90% carry a GS1 Unique Identifier (GTIN)
- 1,500,000 GTINs are currently registered in GDSN
- GDSN as a source for trusted data. Latest report published on the value of trusted product data

Progress around African countries so far

- ETHIOPIA: National Drug Regulatory Authority is developing policy and regulation for GS1 standards adoption, designing and implementing a national level track and trace system.
- MYANMAR, HAITI, TANZANIA, ZAMBIA: Drug Regulatory Authority developing policy and regulation for GS1 standards adoption.
- SOUTH AFRICA: Implementation of GS1 standards.
First steps

- Creation of GS1 Local User Group in country to deliberately drive adoption
  - Industry, Government, Partners and GS1 Collaborative Working Groups and reporting
  - Enforcement of identification and data capture standards across the board
  - Enable Chain of custody and pedigree of commodities and channels
  - GS1 Traceability Standards
  - Recall Patient-safety Efficient supply chain

The Global Language of Business
Together, let’s build a healthy future in AFRICA

Thank you!
Contact Information

Tunde Odunlami
CEO

GS1 Nigeria
MAN House, 3RD Floor
77, Awolowo Way,
Ikeja, Lagos-State, Nigeria

T +2348099999333

E enquiries@gs1-nigeria.org

www.gs1ng.org/healthcare