



This is one of a series of four articles especially commissioned by the Medicines Transparency Alliance (MeTA) which asked independent journalists in four of the pilot countries to look at how some of the issues that MeTA will tackle are affecting people.

## Encouraging quality of medicines in Ghana

By Caroline Boateng  
Accra

Men weave in and out of the jam of minibuses and buses in the Circle Lorry Station in the Ghanaian capital, Accra - the main transport hub for passengers to all areas in the city. The men carry transparent polythene bags packed with medicines.

One of the vendors, Abu Bakari, aged about 30, is trying to attract the interest of passengers in a vehicle, the driver of which is waiting until all seats are taken before he begins the journey.

“How much is your paracetamol?” I ask, to get his attention.

He immediately turns towards me, seeing an opportunity for a sale.

“It is 10 pesewas” he responds. A pesewa is one-hundredth of a cedi, and a cedi is worth about a dollar. The daily minimum wage is 2.25 cedis.

I get him to move away from the blaring microphones used by many of the drivers and their mates to announce their routes.

“OK, tell me, apart from paracetamol, what other painkillers do you have?”

“Rapinol (a medicine for colds), Ibrufen, Aspirin, Efpac,” he replies, and adds, “But what is wrong with you? When did the headache start? Do you feel nauseous or dizzy?”

I tell him I have a headache and he suggests that since it is just a headache with no other symptoms then the paracetamol will be fine.

“What if I had the symptoms you mentioned?” I ask.

“Then I would have suspected that you might have some other ailment that was showing itself as a headache.”

Bakari explains that he gets his supplies of medicine from the sales representatives of local and international drug manufacturers in the Central Business District (CBD). He mentions Kinapharma, Ernest Chemist, M&J Pharmaceuticals and Phyto-Riker.

“I have a solid source of supply of drugs from suppliers in the CBD, and I make my purchases based on the drugs that my clients most often asked for.”

Among the sizeable cache of tablets, capsules and creams arranged neatly in his polythene bag are antibiotics such as amoxicillin, flucoxacillin, and cloxacillin, as well as painkillers.

He says half his clients come to him describing symptoms, while the other half come asking for specific drugs.

“In all cases, I take my time to probe further and suggest a drug that will work. Some get offended and walk off, but others are receptive to my probing and that sometimes develops into friendship. These clients turned friends come looking out particularly for me at the station whenever they came by.”

“But are you a licensed chemical or drug seller?” I ask.

“No, but I have done this job for five years and I am familiar with common symptoms of ailments. People here mainly suffer from malaria, with symptoms like body aches, headaches and the like.

“I also learn a lot from the suppliers. I just completed basic school and can read something, but when I do not understand, I ask questions. I sometimes suggest drugs to my clients and they come back thanking me.”

However, most of the unlicensed salesmen get their sources from suspicious suppliers, though they would not admit it. Their medicines sell for roughly the same prices as drugs sold in shops. If the price is lower, the drug may be a fake.

Earlier this year, Vice President Aliu Mahama challenged the Pharmaceutical Society of Ghana to step up the fight against fake and sub-standard drugs.

In April, the Society responded, launching an “Ask your Pharmacist Campaign” to encourage people to direct their enquiries about drugs to accredited pharmacists, and to buy from them, rather than from unlicensed vendors.

A film, “If Symptoms Persist”, was screened in which Dr. Alex Dodoo, the Society’s president, and Dr. Ferdinand Tay, president of the Consumers Association of Ghana, warned about the consequences of leaving the fake drugs menace unchecked.

Dr Dodoo says the Society believes that “anyone in the profession must be regulated and controlled for best practices. If we allow unlicensed drug peddlers to continue, it affects the health of people as the common man who needs a drug and buys from them does not know the difference between a pharmacist and someone who is just selling drugs.”

Deputy Health Minister Gladys Ashitey has emphasised the government’s determination to ensure that medicines sold in the country are of top quality. She says the Medicines Transparency Alliance (MeTA) will help find ways of removing blockages to people’s access to quality drugs.

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**Note for editors:**

The newly launched Medicines Transparency Alliance (MeTA) will bring together government, business and civil society to share information and analysis about the problems around the supply of medicines in Ghana, including their quality, availability, price and promotion, and work together to explore possible solutions. This is part of a global effort, initially funded by the UK Department for International Development (DFID) in collaboration with the World Health Organization (WHO) and the World Bank to encourage greater transparency and accountability around the procurement, supply and use of medicines. MeTA will work initially in seven pilot countries – Ghana, Jordan, Kyrgyzstan, Peru, the Philippines, Uganda, and Zambia.

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