

# ADEBAYO'S STORY

When I was 15 years old, I suffered from a severe asthma attack and my father purchased medicines which he got prescribed from the hospital from a local, legitimate pharmacy. I took one pill in the afternoon and one in the evening – just these two pills were enough to put me in a coma for three weeks. After 21 days on life support, I finally woke up and was told that the medication I took to help with my asthma attack was not legitimate medicine, but instead falsified. My family were so terrified during my hospitalisation – my sister even told me that she had, for the first time, seen my dad in tears.

An examination of the pill I took revealed that it didn't contain any ingredients legitimate asthma medicine would, but it was actually made of a sedative. I was just a teenager then. I had no idea as to why anyone would make or sell a fake drug. As I learned more about fake medicines, I got really angry that someone actually thought my life was worth a few cents.

My personal experience with fake medicines inspired me to undertake more research into drug manufacturing and quality assurance.

After graduating from high school, I studied Pharmacy and later on business with a focus on entrepreneurship at Yale University in the US. This is where I met two other students, and together we launched a start-up, called RxAll, two years ago. Our start-up aims at tackling the global falsified medicines epidemic by developing digital health solutions. We recently created a handheld nanoscanner™ platform called the RxScanner™ which enables users to verify the authenticity of their medicines, which subsequently prevents patients from taking any substandard or falsified drugs. So far, we have distributed around 70 devices to customers including food and drug administration agencies and hospitals in Africa & SE Asia, as well as providing drug testing to over 200 pharmacies across Africa and SE Asia. Just recently, we won the Global Challenge prize hosted by Hello Tomorrow. Being recognized for my hard work during the past couple of years was a particularly proud moment for myself. It made me realize how far I have come since I started my fight against falsified medicines, yet so much more work needs to be done.

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# FIGHT THE FAKES STORIES

AT FIGHT THE FAKES, WE SHARE STORIES TO SHOW THE REAL LIFE EFFECTS OF SUBSTANDARD AND FALSIFIED MEDICINES.

Are you a victim or do you know someone who fell victim to falsified and substandard medicines? Speak up and share your story, send your enquiry to [SECRETARIAT@FIGHTTHEFAKES.ORG](mailto:SECRETARIAT@FIGHTTHEFAKES.ORG).



SPEAK UP ABOUT FAKE MEDICINES

# KWASI'S STORY

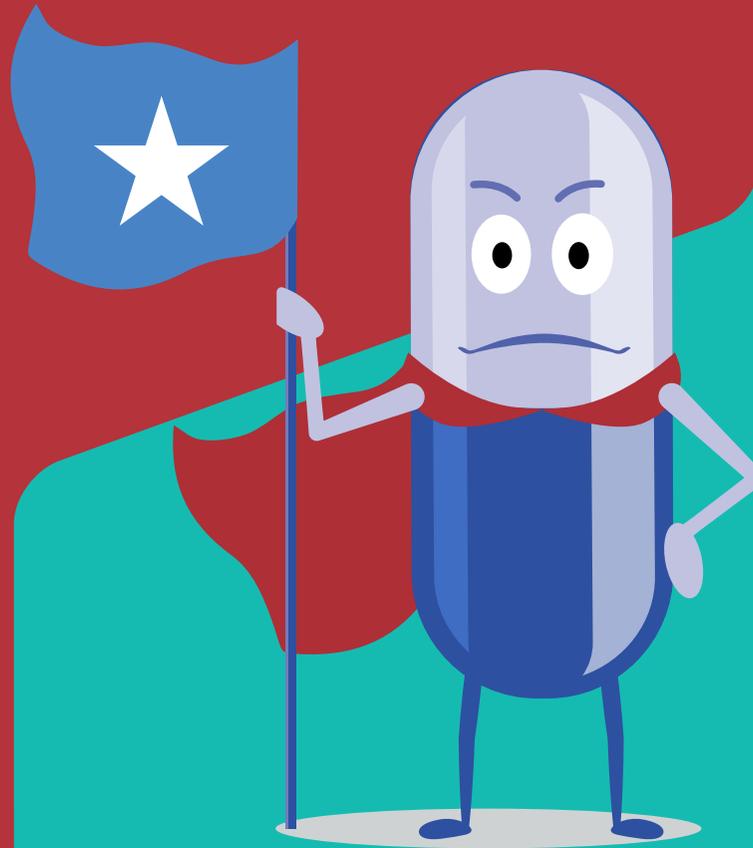
**Testing for fake medicines is essential** – It's been a long personal journey. Between 2011 and 2015, I was the PQM country consultant working on the monitoring programme directly with Ghana's FDA team. We actively contributed to the USP Medicines Quality Database, a great resource which gave the World Health Organizations (WHO) almost 30% of the cases used to analyze for their study on substandard and falsified medicines.

In 2015, I started working on different USP projects, but thankfully, I could continue my work on quality medicines. My work allowed me to go with the team around the country to take samples from the medicines distribution channels, from warehouses, public and private hospitals, retail pharmacies, over the counter sellers, mission hospitals, basically across the whole medicines supply chain. In addition, we were able to take samples from the informal sector.

**Capacity building helps secure gains for the future** – What is very rewarding is that our work goes beyond testing. USP Ghana trains and builds capacity. The more competent regulatory staff are in dealing with quality medicine, the better it is for the patients and the health system to ensure that quality products reach them. For this reason, we are looking at ways to build capacity when regulators are being schooled. We have piloted a project along with the University of Ghana School of Pharmacy, where we introduced lessons to final year students. It was great to see the results of our work in Mauritius for instance, where they now have their own medicines regulatory laws.

**The story does not end here** – falsified antibiotics is a major issue on the public health agenda but it doesn't command as much attention.

What we can test are the specific antibiotics used to treat TB but unfortunately, we cannot extend the screening to all antibiotics. So, while a great deal has been done to address the public health challenge of falsified anti-malarials, there is still plenty of work ahead.



I had heard countless stories from my parents and family friends about people in Somalia who had used medication they purchased from unlicensed pharmacies and subsequently became ill or even died. This deeply disturbed me and inspired me to delve into Somalia's pharmaceutical industry. My thesis topic looked at health system in failed and fragile

states, with Somalia following the 1991 civil war as a case study. My research yielded a lot of harsh truths about the current state of Somalia's ailing pharmaceutical industry and of the health system as a whole. A combination of poor health literacy and low levels of health seeking behaviour, made patients more susceptible to ignoring medical advice given by their healthcare workers or to not seek advice entirely. Over the counter medication that patients receive from local pharmacies cannot be regulated and therefore are not always effective or safe. For patients, the lack of regulation allows importers and their international distributors to use Somalia as a pharmaceutical dumpsite for their expired and falsified medicines. Dr Dufle, a physician who runs one of the largest private hospitals in Mogadishu said in a recent article that falsified medicines are "worse than bombs, because a bomb kills 10 or 20 people. But these drugs can kill hundreds of people and no one will hear about it". This profound statement emphasized the magnitude of despair caused by falsified and substandard medicines in Somalia. Somali health officials have acknowledged that there is a widescale problem in accessing safe medicines, however without strengthening the healthcare system, it would be near impossible to provide safer alternative methods to procuring medical products. However, due to a myriad of contributing factors that stem from a poorly funded and weakened health system, it is not feasible to attempt to change this without implementing regulatory policies and investing in the necessary technology and personnel. This is why campaigns like Fight The Fakes are particularly important in low resource settings, as they are able to raise awareness on this issue that is very often overlooked. They are able to focus on advocacy and bringing in multi-sectoral stakeholders to the discussion without being anchored down by the never-ending tides of politics in healthcare. My work at Fight The Fakes has allowed me to bring my passion for Global Health and my unwavering hope of a better Somalia to fruition.

# NABINA'S STORY