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Antiviral policy for Avian Influenza in Indonesia

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Abstract

Indonesia has the highest number of AI case in the world for the year 2009. The Government of Indonesia (GOI) has decentralized system of governance in 33 provinces and 498 districts is challenged greatly in the antiviral policy and its implementation. Antiviral has been used as treatment to an outbreak of H5N1 virus. This qualitative research was aimed at exploring the policy formulation of antiviral in Indonesia and its implementation in Jakarta and Banten provinces. The research was conducted in Feb 2007-June 2008. The primary data were collected through in-depth interviews and focus group discussions. The results show that the management of antiviral using a policy-making process that is not able to produce a good response. The government has made efforts to increase the use of oseltamivir, but the result is not good. The use of antiviral drugs is still not accepted by the public.

Result and Discussion

The International Environmental Context of Antiviral Policy

The prevalence of AI pandemic has not been used in countries to stockpile antiviral. The only available antiviral drug in Indonesia is oseltamivir given by Roche. However, the suppose was lacked in response to high demand, Roche has advised the implementation of the policy of antiviral in Indonesia through the World Health Organization for further supply. Then, Dr. Budhima Lokeku, Dr. Peter Drahos and Wandarkis Nusaba in the Global Health University, University of Indonesia, have discussed the relative high cost of antiviral, wannonce to the data from WHO, Indonesia will carry the burden of the cost of the global pandemic H5N1 in Indonesia, 75% in Vietnam, and 172% in Laos. At the current price, many countries may survive. But when the crisis persists, there will certainly be increased in demand. Donations from developed countries to developing countries is one of the ways that will help the situation, but it won't be sufficient if a country contributed thousands of pills to Indonesia. Therefore, compulsory licensing is the best option. It is estimated that Indonesia needs 900 million U.S. dollars until the year 2008 (Kamata, Kansai, and Watanabe 2008). In 2006, the Government of Indonesia has allocated a fund of $7.4 million. Assistance from bilateral and international donors is estimated at 90 million U.S. dollars. The grant received by the Government of Indonesia reached US$1.46 million which 59% received from the U.S. government. The contributions of international agencies in antiviral policy in Indonesia have been high.

The Political & Legal Contexts of Antiviral Policies

The Government of Indonesia Regulation Number 40/2001 stipulated the control of infectious disease, this policy is responsible for the implementation of prevention and outbreaks. The implementation of the measures will be supported by the central, regional, and local government institutions in the region. The budget for counter measures bar from each local government institution involved in the pandemic issues. The difference in the budget is due to the central government control. The aim of this study is to analyze the content and context of the antiviral policy to cope with the current antiviral intervention in Indonesia.

Research Method

This qualitative research employed retrospective analysis exploring the contextual factors of the antiviral policy and its implementation in Indonesia. The research was conducted in March 2007 - June 2008 involving informants from the central government agencies: Directorate General of Centers for Disease Control, Directorate General of Medical Services, Directorate General of Non-Communicable Diseases, National Commission on Avian Influenza Pandemic Coordinations (KOMPA), WHO, and Indonesia Antiviral Research & Development RI examined cultures of the 72 specimens. They are found to be genetically sensitive to Oseltamivir and Zanamivir. Policy for antiviral in Indonesia has not to follow the model of WHO only limitation, the antiviral policy is still under the central government control. The aim of this study is to analyze the content and context of the antiviral policy to cope with the current antiviral intervention in Indonesia.

Conclusions and Recommendations

Oseltamivir is the currently only alternative treatment for AI in Indonesia. In the initial occurrence of AI cases, the government of Indonesia had not sufficiently procured oseltamivir. Several donors had given the drug to the Indonesian government of Oseltamivir. Selection of antiviral drugs and the anticipation of Oseltamivir will be a pre-emptive measure in Indonesia set by the Ministry of Health Department of Disease Control in 2005. The confirmation of Oseltamivir which may cause confusion. It may lead to improper disposal and affecting future stockpiling plan.

References
