

UGANDA EYES AFRICAN MARKET WITH SICKLE CELL DRUG PRODUCTION

Sickle cell disease remains one of the Uganda's biggest inherited health burdens. Many patients endure repeated emergencies, severe pain crises, chronic anaemia, infections and strokes, while hospitals struggle to maintain stable drug supplies.

The Government believes Uganda may be entering a major turning point after Quality Chemical Industries Limited (Qcil) officially launched locally manufactured hydroxyurea, which is expected to reduce stock-outs, lower treatment costs and strengthen access to one of the world's most important sickle cell medicines. ..

A MAJOR BREAKTHROUGH

The launch at the company's Luzira manufacturing facility on yesterday was described by health workers and patient advocates as one of Uganda's most significant pharmaceutical breakthroughs in recent years, particularly for families who depended entirely on imported medicines and donor-supported supplies. Hydroxyurea has for decades been clinically proven to reduce painful sickle cell crises, lower hospital admissions, minimise the need for blood transfusions and improve survival among children and adults living with the disease. However, access to the medicine in Uganda has remained inconsistent because nearly all supplies were imported.

In private pharmacies, a month's supply of imported hydroxyurea has often cost between sh150,000 and sh300,000, depending on dosage and availability, placing it beyond the reach of many families.

The dependence on imported medicines became even more exposed during and after the COVID-19 pandemic, when global supply chain disruptions delayed shipments of specialised drugs across Africa, leaving hospitals struggling to access essential medicines.

According to the health ministry, Uganda has over the years spent billions of shillings importing specialised medicines, with health experts arguing that local production could reduce treatment costs, strengthen medicine security and protect patients from global shipping disruptions.

During a recent interview at Mulago National Referral Hospital's sickle cell clinic alone, it was revealed that doctors review nearly 500 patients every week, most of them children whose families struggle to maintain continuous treatment because of the high cost and unreliable supply of hydroxyurea.

Dr Deogratus Munube, a haematologist, said interruptions in treatment often push patients back into severe crises, creating a cycle of emergency admissions, blood transfusions and prolonged hospital stays that place enormous pressure on Uganda's health system.



Dr Diana Atwine, the permanent secretary at the Ministry of Health, launches the Quality Chemical Industries Limited (Qcil) locally-manufactured hydroxyurea. Looking on is Qcil founder Emmanuel Katongole (right) and Qcil chief executive officer Ajay Kumar Pal

A NEW CHAPTER

Speaking during the launch, Qcil chief executive officer Ajay Kumar Pal described the hydroxyurea production facility as the beginning of a new chapter in African pharmaceutical independence and self-reliance.

"Africa is writing a new chapter. Not of dependence, but of dignity. Not of uncertain hope, but of home-grown healing," Pal said.

He said the decision to manufacture hydroxyurea locally was aimed at addressing one of Uganda's most urgent public health needs while helping African countries reduce dependence on imported life-saving medicines.

"We have chosen action, we have chosen sovereignty and we have chosen life. This is bigger than manufacturing a tablet. It is about restoring hope to families who have lived in fear for years

wondering whether treatment will be available tomorrow," Pal added.

He said the facility was built for families who have endured years of pain, uncertainty and interrupted dreams because of sickle cell disease, noting that many children continue missing school and suffering repeated crises simply because treatment remains difficult to access consistently.

Qcil founder Emmanuel Katongole described the hydroxyurea plant as one of the most advanced pharmaceutical facilities on the continent approved by the World Health Organisation (WHO), saying Uganda was now positioning itself to solve one of Africa's biggest health burdens through local manufacturing instead of relying on foreign imports and donations.

Katongole said the company

was determined to manufacture hydroxyurea for both adults and children, promising what he called a long-awaited African solution to an African problem.

"We are not driven by where the money is. We are driven by solving an African problem using an African solution," Katongole said.

He also praised President Yoweri Museveni for supporting the establishment of the pharmaceutical plant during difficult financial moments, revealing that government once extended support after the company fell short by \$5m while setting up the facility, which they paid back to the Government.

Katongole said international research institutions, including the Texas Children's Centre in the US, had provided data showing the enormous burden sickle cell disease continues to place on

THE BURDEN

According to health ministry estimates, Uganda records approximately 20,000 babies born with sickle cell disease every year, placing the country among those carrying the world's highest burden. More than 36% of Ugandans are estimated to carry the sickle cell trait. According to the study done by the Lancet in 2021, nearly 560,000 Ugandans were living with sickle cell disease, while Africa accounts for more than 66% of the estimated 120 million people affected globally. The continent also records nearly 1,000 babies born with the condition every day.

African countries, particularly Uganda, which remains among the worst affected globally.

"For decades, Africa has exported raw materials and imported expensive medicines back at unaffordable prices.

This facility changes that conversation. We are proving that African companies can build world-class pharmaceutical industries capable of solving African health problems sustainably and at scale," he said.

Officiating at the launch, Ministry of Health permanent secretary Dr Diana Atwine described the launch as a major milestone in Uganda's wider strategy to improve sickle cell care and strengthen local pharmaceutical manufacturing capacity.

"We will not have stock-outs, delayed shipments or foreign exchange shortfalls. Uganda will now have a domestically reliable supply of hydroxyurea," Atwine said.

She said local production would help lower medicine costs by eliminating freight charges, import expenses and intermediary mark-ups that previously made hydroxyurea unaffordable for many families.

Atwine added that the Government had already increased budget allocations for hydroxyurea procurement and was pushing to include the medicine on Uganda's essential medicines list following recent continental discussions involving African health ministers and policymakers.

"This is going to reduce those admissions significantly because we want treatment to move closer to the people," Atwine said.



Dr Atwine (second-left) being shown the Qcil sickle-cell locally-manufactured drug