In 1977, fresh from my training and work as a pharmacist in the UK, I set up Emzor Chemists Limited, a small retail pharmacy shop in Lagos, Nigeria. Today, Emzor manufactures over 190 different products across 26 therapeutic classes, ranging from antimalarials, analgesics and antibiotics to vitamins, and employs over 2,000 people. However, Nigeria’s home-produced supply of quality medicines still remains inadequate, and we need to become less reliant on imports.

Africa’s population is growing at a rate of 2.7% a year and is expected to double to 2.5 billion by 2050. Meeting the health needs of this growing population will require a strong supply chain of quality therapies to cure and prevent disease. The current situation is also untenable, with African countries spending around USD 14 billion a year of donor funds to import more than 80% of our drug and vaccine needs from overseas.

In 2005, the revised Nigerian National Drug Policy aspired to fulfill 70% of the country’s needs for medicines through local manufacturing by 2015. It also sought to promote pharmaceutical R&D using local products and to increase the availability of high-quality, effective, affordable and safe medicines. However, progress has been very slow.

Only 30% of medicines in Nigeria are produced locally while 70% are imported. Experts believe that strengthening local pharmaceutical manufacturing will enable it to meet up to 75% of national medicine requirements and fortify Nigeria’s drug security by reducing dependence on pharmaceutical imports.

The call to expand local manufacturing

The good news is that, in the wake of COVID-19, Africa’s pharmaceutical manufacturing is on the move. In 2021, the African Union mandated the Africa CDC to promote the development of vaccine manufacture in Africa, as a health security imperative. The goal is to develop, produce and supply over 60% of Africa’s total vaccine requirements by 2040, that is to say, 1.5 to 1.7 billion doses each year.
This ambitious vision for scale-up of African vaccines will improve not only Africa’s public health response to epidemics/pandemics but also its capacity to produce medicines for preventing and treating infectious diseases like malaria. In 2021, malaria was responsible for 619,000 deaths globally, of which 96% were in sub-Saharan Africa; this is more than three times the number of COVID-19 deaths reported in Africa in 2022.¹²

Production and regulation challenges

Undeniably, Nigeria’s and Africa’s pharmaceutical supply chains must be reinforced. Only five³ of the 375 drug manufacturers in sub-Saharan Africa⁴ produce drugs that have attained internationally recognized quality standards. The AU established the African Medicines Agency (AMA) in 2019 to develop a robust and efficient regulatory system for health products, raise the quality of local medicine production to meet stringent regulatory standards, and displace substandard medicines from the supply chain. The AMA has also been tasked with harmonizing regulations on medical products marketed across Africa, as well as coordinating and supporting pharmacovigilance to monitor the safety and effectiveness of these products.

Drivers of change

In 2012, the Pharmaceutical Manufacturing Plan for Africa (PMPA)⁵ business plan was devised to build a vital, self-sustaining African pharmaceutical sector that satisfies international quality standards. This is now supported by a World Health Organization (WHO) 2021 resolution to improve access to quality medicines and health technologies by strengthening local production.⁶

Nigeria, other African countries and partnerships like MMV are committed to the implementation of this WHO resolution. Emzor, too, is part of this movement. We are working with MMV to develop and produce a key antimalarial drug, sulfadoxine-pyrimethamine (SP), to WHO prequalification standards – with approval expected in 2023. As part of this initiative, Emzor has conducted many training workshops, particularly for quality control and quality assurance staff, and has procured state-of-the-art equipment to enable testing of raw materials and finished product in compliance with pharmacopeial standards. SP is used to protect an estimated 13 million pregnant women annually in sub-Saharan Africa. When coupled with amodiaquine, it is used as seasonal malaria chemoprevention for the young; SP + amodiaquine (SPAQ) protected over 48 million children from malaria in 2022.

MMV has already had some success in diversifying the supply chain for this vital drug in partnership with a Kenyan company, and is also supporting another Nigerian company. Establishing quality SP production on the continent in this way will ensure a sustainable and secure supply of this life-saving intervention.

Strategic collaboration and coordination are the key to success

To build a robust pharmaceutical sector, countries will need to bolster healthcare infrastructure, procurement processes, access to finance and skills on the ground to meet the challenge. Coordination among AU Member States and sectors is also vital. A self-sustaining pharmaceutical sector is key to securing the supply chain. It will not only help to grow the capacity of African drug manufacturers and secure the drug supply chain but will also power economic growth across multiple sectors, ensure equitable access to life-saving and life-enhancing interventions and improve public health outcomes in Africa.

When I started Emzor over 40 years ago, the pharmaceutical sector in Nigeria was struggling to grow. Today, the country holds the potential to deliver quality pharmaceutical products for domestic and regional therapeutic needs.

Emzor Pharmaceutical has witnessed tremendous growth over the years, becoming one of the largest of Nigeria’s more than 115 pharma companies. And this is just the beginning! In partnership with organizations like MMV, and in collaboration with our national and African partners, Emzor aims to produce and ensure access to locally-made, quality-assured medicines for malaria, like SP. We are committed to playing our part in realizing Nigeria’s potential to produce the high-quality, affordable medicines that the country and region deserve.

Dr Stella Chinyelu Okoli
Founder and CEO,
Emzor Pharmaceutical Industries Limited, Nigeria

₅. The PMPA was devised by AUDA-NEPAD (African Union Development Agency New Partnership for Africa’s Development) See https://www.nepad.org/social-sector/our-insights/should-sub-saharan-africa-make-its-own-drugs

2. Powering towards a vibrant pharmaceutical manufacturing sector in Africa

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