

COMMENTS ON THE MAIN CHANGES IN THE MEDICAL CATALOGUE & ORDER LIST 2002

A lot of changes appear in the drugs family this year. The objective was to get coherence between the treatment protocols (described in the different MSF guides: clinical guidelines, essential drugs, nutrition guidelines, clinical AIDS care guidelines) and the drugs present in the MSF order list. However some drugs were added without guarantees about the supply possibilities or everlastingness. A new justification code was created: C. This means the article is potentially subject to important modifications (supply sources, better alternatives).

The result we've got is an international list for all MSF sections.

For the supplies and equipment, the revision was done according the needs and the supply constraints.

ORAL DRUGS

New oral drugs

AMOXICILLIN + CLAVULAN. AC., 100+12.5mg/5ml, 60ml oral susp.

AMOXICILLIN + CLAVULANIC ACID, 500 + 62.5 mg, tab.

The dosages with less clavulanic acid are preferred because it gives less side-effects. But it is not existing as a generic drug, and remains expensive.

AMODIAQUINE, eq. 200 mg base (260 mg hydrochloride), tab. NEW DOSAGE contains 200 mg base = 260 mg hydrochloride. It replaces the old tablet of 153 mg base (200 mg hydrochloride)!

Not in list for years because of its severe side-effects when used as prophylaxis. Introduced for the treatment of malaria, always combined with artesunate. Never use as prophylaxis.

ARTEMETHER 20 mg + LUMEFANTRINE 120 mg, (co-artemether) tab. To justify: PM. Combination of two antimalarials containing one artemisinin derivative, as recommended for the treatment of uncomplicated malaria. Only coformulation existing on the market. This combination is expensive in comparison to other associations with artemisinin derivatives, and remains contra-indicated for children less than 10 kg and pregnant women.

BISACODYL, 5 mg, tab. Mandatory with morphine and similar treatments. Bisacodyl has less interaction with morphine than senna (on the WHO Essential Drugs list).

CLINDAMYCINE, 300 mg, tab Order to be justified PE. Second choice treatment and prevention of *Pneumocystis carinii* pneumonia.

ETHINYLESTR. 0.05 mg + LEVONORGESTREL 0.25 mg, pack of 4 tab Emergency contraception: 2 tablets within 72 hours after coitus, followed by 2 tablets 12 hours later.

FLUOXETINE, 25 mg, tab. Prozac® First choice for PTSD (post traumatic stress disorder) when pharmacotherapy is considered necessary. To justify: P (Reserved to mental health programmes).

HALOPERIDOL, 2 mg, tab. Besides the Haloperidol drops, the tablets are introduced in the MSF order list.

MICONAZOLE NITRATE, 10 mg, muco-adhesive tab. Curative and prophylactic treatment of oropharyngeal candidiasis (mainly in HIV patients). The muco-adhesive tablet should be applied to the gingiva (once daily for at least a week). The tablet will remain for about 8 to 13 hours after which it will have disappeared.

MORPHINE SULPHATE, 10 mg, caps. normal release To start pain treatment and assess the needed dose of morphine. Starts action after 30 minutes, time of action: 4 hours.

MORPHINE SULPHATE, 10 mg, and 30 mg caps. slow release. Severe and persistent pain, especially cancer pain. Time of action: 12 hours. All forms are to be justified: M.

RIBAVIRINE, 200 mg, tab. To justify PME. Used to treat Lassa fever. If ordering, you must contact your medical/public health department. Very expensive drug.

AIDS treatment programmes with antiretrovirals

The following drugs are all to justify: PC (AIDS treatment programme, and may change in the future)

DIDANOSINE (ddI), 200 mg, caps.

EFAVIRENZ (EFV), 200 mg, caps.

INDINAVIR SULPHATE (IDV), eq. to 400 mg base, caps.

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LAMIVUDINE, (3TC), 150 mg, tab.

NELFINAVIR (NFV), 250 mg, tab.

NEVIRAPINE SUSPENSION (NVP), 50 mg/5 ml, 240 ml, bott.

NEVIRAPINE (NVP), 200 mg, tab.

STAVUDINE, (d4T), 30 mg and 40 mg, caps. The 30 mg strength is for persons weighing less than 60 kg, while the 40 mg strength is for persons weighing more than 60 kg. Stavudine (d4T) has got irreversible neurotoxic side-effects. Beware of the dosage.

ZIDOVUDINE, (AZT), 100 mg, caps.

ZIDOVUDINE, (AZT), 300 mg, tab.

ZIDOVUDINE (AZT), 300 mg + LAMIVUDINE (3TC), 150 mg, tab.

Antituberculosis drug

FDC (Fixed Dose Combination) first line treatment: new dosages recommended by WHO and not always available yet. To justify: PM. Only order after acceptance by your medical/public health department and it is mandatory to order a complete treatment per patient.

ISONIAZID 150 mg + ETHAMBUTOL 400 mg, tab.

ISONIAZID 300 mg + THIAETAZONE 150 mg, breakable tab.

RIFAMP.150 + ISONIAZ.75 + PYRAZINAM.400+ ETHAMB.275 mg, tab.

RIFAMPICIN 150mg + ISONIAZID 150mg + PYRAZINAM. 500mg, tab.

RIFAMPICIN 150mg + ISONIAZID 75mg + PYRAZINAM. 400mg, tab.

RIFAMPICIN 60mg + ISONIAZID 30mg + PYRAZINAMIDE 150mg, tab.

RIFAMPICIN 150 mg + ISONIAZID 75 mg, tab.

RIFAMPICIN 300 mg + ISONIAZID 150 mg, tab.

RIFAMPICIN 60 mg + ISONIAZID 30 mg, tab.

RIFAMPICIN 60 mg + ISONIAZID 60 mg, tab.

Second line treatment. Antibacterials used to treat multi drug resistant tuberculosis in combination with other drugs. To justify: PC. Order only after acceptance of your medical/public health department.

CYCLOSERINE, 250 mg, tab.

ETHIONAMIDE, 250 mg, tab.

LEVOFLOXACIN, 250 mg, tab.

OFLOXACIN, 200 mg, tab.

PROTHIONAMIDE, 250 mg, tab.

PARA-AMINOSALICILIC ACID (PAS), 4 g, delayed rel.gran, sach.

Changes (on the list again):

ACETAZOLAMIDE, 250 mg, tab. Use reserved for treating chronic glaucoma and prevention and treatment of mountain sickness.

AMITRIPTYLINE, 25 mg, tab.: To justify:P. Fluoxetine is a better antidepressant. Only indication: Antalgic for neurogenic continuous pain.

AMPICILLIN, 250 mg, tab. To justify: P. Indicated for the treatment of non epidemic shigellosis still susceptible to ampicilline (mostly amongst children)

ARTESUNATE, 50 mg and 100 mg, tab.: not to be justified anymore. The association of two antimalarials with artemisinin derivatives is the recommended treatment of WHO for uncomplicated malaria. All monotherapy should be avoided.

CLOFAZIMINE, 100 mg, tab. To justify: P. Atypical mycobacteria linked to AIDS.

Multibacillary leprosy, in combination with other antileprotic drugs. Follow the recommendations of the national leprosy programme or, in default of these, the WHO recommendations. This prescription should be combined with the setting-up of a programme.

DIETHYLCARBAMAZINE, 100 mg, tab.To justify: M. Lymphatic filariasis (Wuchereria bancrofti, Brugia malayi). Use only in areas where there is no Loa-Loa and no onchocercosis. Because diethylcarbamazine may cause a shock due to microfilariae lysis (loiasis, onchocerciasis).

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FLUCONAZOLE, 50 mg, 100 mg, 200 mg, caps.: Different dosages are necessary depending of treatment or prevention.

Change of label: HYOSCINE BUTYLBROMIDE (butylscopolamine bromide), 10 mg,tab (instead of BUTYLHYOSCINE (butylscopolamine) BROMIDE)

LEVONORGESTREL, 0.03 mg, tab. The use of levonorgestrel alone is not recommended, except as contraceptive if major risk of thrombosis and phlebitis.

PRIMAQUINE DIPHOSFATE, 15 mg base, tab. Antimalarial used in the prophylaxis against Plasmodium falciparum associated to another antimalarial, as gametocide, this means to slow down the transmission of this parasite, and for the definitive treatment of Plasmodium vivax. It is also considered as an antimalarial to combine with a derivate of artemisinin (Artecom®), but still at an experimental stage nowadays. Sometimes included in national protocols, for its action on P. vivax and its effect on the transmission. It is not considered today as a priority drug in the management of malaria.

Also used for the treatment of Pneumocystis carinii associated with clindamycin.

VERAPAMIL HYDROCHLORIDE, 40 mg, tab. Order to be justified: M. Antiarrhythmic, antianginal, antihypertensive.

Oral suspensions on list:

To justify:P. The syrup forms are reserved for therapeutic feeding centres and paediatric wards.

AMOXICILLIN, 125mg/5ml, dry powder fr 100 ml oral susp.,bott

AMOXICILLIN + CLAVULAN. AC.,100+12.5mg/5ml, 60ml oral susp.

CLOXACILLIN, 125mg/5ml, dry powder fr 100ml oral susp., bot.

COTRIMOXAZOLE, 200 + 40mg/5ml, dry powd.fr 100ml susp, bott.

ERYTHROMYCIN, dry powder for susp. 125 mg/5ml, 100 ml, bot.

IBUPROFEN, 100 mg/5 ml, 150 ml, syrup, bot.

METRONIDAZOLE, 125mg/5ml, dry powd.fr 100ml oral susp.,bott.

PARACETAMOL (acetaminophen), 120 mg/5 ml, syrup, 60 ml, bot.

PENICILLIN V, 125ml/5ml, dry powd.fr 100ml oral susp., bott.

Deleted from list

ALUMINIUM HYDROXIDE, 300 mg, tab.: already 500 mg strenght on list

CHLOROQUINE PHOSPHATE, 50 mg base/5 ml, syrup, 60 ml, bott. The syrup form is not recommended for reasons of overdose: it is a powder for oral suspension and a bad dilution of the powder could cause unneeded risks.

CLOMIPRAMINE, 25 mg, tab Replaced by fluoxetine (Prozac®)

DEXAMETHASONE 0.5 mg, tab. Replaced by prednisolone which is first choice for an oral steroid anti-inflammatory.

FOLIC ACID, 1 mg, tab.: 5 mg on list

INDOMETACIN, 25 mg, tab.: Replaced by ibuprofen (therapeutically equivalent).

KETOCONAZOLE, 200 mg, tab. Replaced by fluconazole.

PROPRANOLOL HYDROCHLORIDE, 40 mg, tab.: replaced by atenolol

TOLBUTAMIDE, 500 mg, tab. Replaced by glibenclamide in line with the WHO recommendations.

INJECTABLES

New injectables

Antibacterials used to treat multi drug resistant tuberculosis in combination with other drugs. To justify: PC. Order only after acceptance of your medical/public health department.

AMIKACIN, 250 mg/ml, 2 ml, amp.

CAPREOMYCINE, 1 g, powder, vial

KANAMYCIN SULPHATE, eq.to 1 g base, powder, vial

AMOXICILLIN 1g + CLAVULANIC ACID 100mg, powder (IV & inf.)

CEFTRIAZONE, 250 mg, powder, vial. Besides the 1 g vial

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CLINDAMYCINE, 150mg/ml, 2 ml, amp. To justify: PE. Second choice treatment and prevention of *Pneumocystis carinii* pneumonia.

EFLORNITHINE, 200 mg/ml, 100 ml, amp. Order to be justified. P. Méningo-encephalitic stage of African trypanosomiasis due to *Trypanosoma brucei gambiense*.

Changes (on the list again)

DOPAMINE, 40 mg/ml, 5 ml, amp. To justify: M. For cardiogenic, septic or traumatic shock, after correction of hypovolaemia when necessary, or syndrome of postoperative low cardiac output. Should be used only in a referral hospital with electric IV syringe (IV pump). The infusion rate must be carefully monitored to avoid inadvertent bolus of dopamine potentially fatal.

HYOSCINE BUTYLBROMIDE (butylscopolamine br.), 20 mg/1 ml, amp changes of label (instead of old: BUTYLHYOSCINE (butylscopolamine)).

PAROMOMYCIN (aminosidine) SULF., 500 mg/ ml, amp. Indications: second line treatment for leishmaniasis and contact amoebicide for AIDS patients.

SURAMIN SODIUM, 1 gr, amp., powder + NaCl solvent Not recommended because of its action on the filaria (present in the same areas). Is still used for the treatment of trypanosomiasis in pregnant women. (*Cf Clinical Guidelines, MSF*). Should be replaced by eflornithine and pentamidine.

Deleted from the list

BUPRENORPHINE, 0.3 mg/ml, 1 ml, amp. Replaced by morphine.

HYDROXOCOBALAMIN, (vit B12), 1mg/ml, 1 ml, amp. Vitamin B12 deficiency leads to megaloblastic anaemia. Except for Biermer's anaemia and total gastrectomy, lack of Vit B12 is very rare. The analgesic activity of Vit B12 at high dose (recommended by certain manufacturers) has not been proven.

INSULIN, 100 IU/ml, ISOPHANE (NPH), porcine, 10 ml, vial and INSULIN, 100 IU/ml, RAPID, porcine, 10 ml, vial: replaced by insulin of human origin

LIDOCAINE, heavy, 5%, 2 ml amp. for spinal anaesthesia. Replaced by Bupivacaine heavy 5 mg/ml for spinal anaesthetic (DINJBUPI2A-) on the MSF order list, since Lidocaine can induce peripheral nervous troubles consequently to spinal anaesthetic.

METAMIZOLE (dipyrone, noramidopyrine), 500 mg/ml, 2 ml, amp.. Replaced by diclofenac or acetyl salicylate lysine.

SULFADOXINE 500 mg + PYRIMETHAMINE 25 mg, 2.5 ml, amp. Very limited indications. Replaced by injectable artemether or quinine.

INFUSIONS

New infusions

DEXTROSE, 10%, 500 ml, plastic pouch + SET; To justify: P. Indications: for quinine infusions.

HALF STRENGTH DARROW'S, 500 ml, solution + SET To justify: P. Best rehydration solution for severe malnourished children dehydrated children. Reserved for therapeutic feeding centres and paediatric wards. Isotonic solution does not contain glucose.

SODIUM CHLORIDE, 0.9%, 250 ml, plastic pouch, + SET. To justify: P. Mandatory for eflornithine infusions.

Deleted

DEXTROSE, 5%, 500 ml, plastic pouch, + SET: only the 1 liter plastic pouch remains on list.

EXTERNAL USE

New external use drugs

SODIUM BICARBONATE, 1 kg, for mouth washes solution. Treatment of oral herpes and aphthosis.

PERMETHRINE, 1 %, lotion, 100 ml, bot. The lotion is replacing the shampoo. (Replacing Lindane, because less toxic and very effective).

MALATHION, 500 mg/100 ml, lotion, bot. To justify: PM. Second line for head pediculosis (lice), if resistant to permethrine.

Changes (again on the order list)

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HALOTHANE, 250 ml, bot. To justify: P. Volatile anaesthetic requiring special apparatus (for inhalational anaesthesia).

Deleted

CHLORHEXIDINE 5%, solution, 1 l, bot. Replaced by the combination chlorhexidine + cetrimide.

OPHTHALMIC DRUGS

New ophthalmic drugs

ACICLOVIR, 3%, eye ointment, 5 g, tube. Prevention of herpes keratitis in neonate born to a mother suffering from genital herpes at the moment of childbirth.

TROPICAMIDE, 0.5%, eye drops, unidose, 0.4 ml or 0.5 ml, bot. Replaces the 5 ml vial, in order to avoid any contamination of opened vials.

VACCINES

New vaccines

IMMUNOGLOBULINS, HUMAN, ANTITETANUS, 250 IU/ml, 1 ml, syr. Prevention of tetanus in a wounded person, who is not or uncompletely immunized, or whose immunization status is unknown, in addition to immunization. Treatment of tetanus, in addition to wound debridement, antibiotherapy, symptomatic treatment and active immunization. Replaces the antitoxine tetanus (serum) of equus origin.

VACCINE, HEPATITIS B, 10doses, 10ml, vial. Vaccine sometimes supplied through the Ministry of Health of the country, or through one organisation like UNICEF.

VACCINE, TYPHOID, "Typhim Vi", multid., 20 doses, 10ml, vial. To justify: P.

Changes

IMMUNOGLOBULINS, HUMAN, ANTIRABIES, 150 IU/ml, 10 ml, amp. On the order list. To justify: ME. Immunoglobulins are not necessary if the primovaccination has been correctly and completely made (*Cf Clinical Guidelines, MSF*). It's a must to contact the medical department of your section if you plan to administrate antirabies immunoglobulins.

DIAGNOSTIC TESTS

New diagnostic tests

CARD, CONTROL BLOOD GROUPING, crossmatch, bedside Card allowing a control of the blood group typing, performed at the patient's bedside before placing the blood bag. Does not replace the preliminary typing of the blood groups of donor and receiver: confirmation method.. Is part of the anaesthesia module.

(DAT test) ANTIGEN, freeze-dried, 5 ml. Freeze-dried solution containing the antigen of visceral leishmaniasis (Kala Azar). Essential reagent for the Direct Agglutination Test (DAT test). Only antigen validated by the Institutes of Tropical Medicine (Antwerp and Amsterdam). Article to be justified: Visceral leishmaniasis (Kala Azar) programmes.

TEST, HEPATITIS C, rapid (HCV SPOT), 100 tests, kit Qualitative rapid test for the detection of antibodies of the hepatitis C virus (HCV) in serum or human plasma. Test used for screening of blood donors. Article to be justified: Pre-transfusion screening programmes.

TEST, serum, HIV 1 + 2, rapid, (Determine), 100 tests, kit Rapid qualitative test for detection of antibodies anti-HIV 1+2. This test can be performed on serum collected in a dry tube or on plasma collected in tube with EDTA. Article to be justified: Pre-transfusion screening and HIV diagnosis programmes.

TEST, HIV 1 + 2, rapid, (Uni-Gold), 20 tests, kit. Rapid qualitative test for detection of antibodies anti-HIV 1+2. This test can be performed on serum, plasma or whole blood. Complementary with other referenced tests for confirmation of a positive screening test. Article to be justified: Pre-transfusion screening and HIV diagnosis programmes.

Changes

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TEST, URINE, glucose, protein, one strip and TEST, URINE, pH,dens,prot,gluc,ket,blood,nit,leuc, one strip are again on the order list. While the strip with proteins only and the strip with glucose, blood, prot., pH are taken out of the order list.

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MEDICAL SUPPLIES

Two new disposable redon sets with 450 ml plastic foldable bottles: one of CH16 drain and one of CH12 drain (with alene needle). Device for large volumes drainage (superficial and deep hematoma, infectious collectings, abdominal drainage). Replaces the reusable system with glass bottles, which is not responding to the new European Norms and consequently not manufactured anymore. They are included in the surgical kits.

The adaptors for the manual vacuum aspiration cannulae are supplied by set of 5 (and not individually anymore).

Adhesive bandage versus cohesive bandage

The adhesive elastic bandage is preferred to the cohesive bandage because of its better contention (to support sprained or dislocated joints).

A new container for needles and syringes, 15 l, cardboard for incineration replaces the 5 l one. This container has been set up within the framework of the safety policy for injection immunizations (WHO/UNICEF) and manufactured for this use. For the mass immunization campaigns the 15 liters model is more adapted for the waste volumes. It is used for the disposal of autodestruct syringes (with fixed needles) during immunization campaigns, and is meant to be destroyed with its contents. This container is included in the immunization kit.

The old container for needles and syringes of 5 l, can still be ordered. This container is intended for health structures (health centers, hospital units) in first phase of emergency situations to ensure the disposal and the safe elimination of sharp waste. Because of its shape, its capacity and its composition, this container should not be used for the disposal and elimination of other soft waste (syringes, gauze, cotton...). Following the MSF recommendations concerning waste disposal, sharp waste should be segregated in a specific container (e.g. drugs empty box) and disposed off in a sharp pit, in non-emergency situations.

MSF does not supply reusable needles anymore! (within the framework of safety policy for injections).

Disposable razors replaces the reusable ones with blades (instrument required to prepare the operative field). Two different reasons: it becomes hard to find reusable ones of good quality on the market and the disposable ones are less dangerous to handle: no need to change the blade.

In the previous versions of the catalogue 2 sizes of condoms were proposed. The small size disappeared because never ordered and difficult supply.

Disposable, sterile surgical gloves: there are now 5 sizes referenced: 6.5 , 7, 7.5, 8 and 8.5. It is advisable to wear two pair of gloves for surgical interventions. It fits better when using two different sizes: e.g. 7 and 7.5.

MEDICAL EQUIPMENT

Following the introduction of new self-inflating bags made of silicone last year, the new anaesthesia masks show up this year. There are two different types of masks.

Anaesthesia masks, round, all in transparent silicone. Selection of 3 sizes to fit all small children.: size 0: premature, size 1: newborn and size 2: small child. Selection of a transparent model for a better observation of the patient. The standard diameter of 15 mm fits inside the connection of the selfinflating bag and other MSF valves. They must be washed, than disinfected or sterilized after each use.

For children, adolescents and adults, there are other masks: with a blue rim and hooks

Selection of 3 sizes to fit all patients: size 2: child, size 4: adolescent and size 5: adult. Selection of a transparent model for a better observation of the patient. Selection of a standard diameter of 22 mm for the connection to fit all the MSF valves. They must be washed, then disinfected or sterilized after each use.

A new mobile operation lamp with halogen bulb (24 V 120 W), to replace the old Star 5 which is not manufactured anymore. A mobile lamp has been chosen rather than a ceiling unit, as it is not always possible to find a solid enough ceiling for attachment. Moreover, a ceiling light is often more complicated to install. Good stability. Power requirement: 220/110Volts.

Electro surgical unit (Coagulasem): this article, described in the previous versions of the catalogue, received a negative feed-back from the field and will not be supplied anymore. The medical technicians are actively looking for a new model meeting the MSF requirements. For any order, please contact your procurement department.

A new oxygen concentrator: De Vilbiss 515KS + OSD, 220V 365W supplied with accessories. Device which allows one to obtain oxygen from ambient air through compression. Item selected in 2001 by the MSF

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anaesthetists in collaboration with the WHO experts group. It replaces the COMPANION 590 model, which is no longer produced. The multi-patient distributor was added in order to administer O₂ simultaneously to several patients (max 4). Selection of an autoclavable humidifier allowing for regular sterilization. Several humidifiers are delivered with the concentrator for that purpose. The felt filters' case is round-shaped in order to standardize the supply of spare parts.

Two new scales are appearing in the catalogue. The adult scale of bathroom type disappeared.

SCALE, beam mechanical, adult, 0 to 150 kg (grad. 200 g). Measuring device used to weigh adults in health and nutritional centers, as well as in hospitals with a precision of 200 g. Strong and stable, easy to use and to clean. Easy and reliable reading (weight precision). Measuring apparatus fixed on scale.

This model is not suitable for nutritional surveys with moving. If it is your case, contact your medical / public health department for more information.

SCALE, beam mechanical, baby, 0 to 15 kg, (grad. 10 g)

Measuring device used to weigh babies in health and nutritional centers, as well as in pediatric wards or maternities with a precision of 10 g. Strong and stable, easy to use and to clean. Easy and reliable reading (weight precision).

Woven surgical trousers and tunics: three sizes are supplied as a model for local manufacture: small, medium and large.

In the sterilization family 2 new items were added:

Kraft paper, roll 70 cm x 300 m. Paper used to wrap the material to be sterilized by autoclave, in order to maintain the sterility. In order to protect correctly the material, use two layers of paper or, even better, a layer of paper added to a layer of textile (in this case, put the textile inside). Is not indicated for sharp material or big surgical instrument boxes, as the paper remains humid on some spots and tears easily. Recommended to pack small sets. Article introduced to replace metal boxes which are very expensive, and to ensure a better sterility of a set by combining textile with a paper layer.

Adhesive paper tape, 1,8 mm x 50 m. Used to seal the boxes and packs containing the material to be sterilized (and check they have not been opened), and allowing to write down the date of sterilization and the content. Use a ball-pen rather than a marker which will tend to leak on the tape, especially if the inscription is done before sterilization. NB: This tape is not a witness of sterilization. It must be used together with TST indicators.

SURGICAL INSTRUMENTS

The new abdominal retractor of Gosset, is composed of 2 blades 58mm and a central blade (Medicon ref.24-55-10). Static function instrument: abdominal retractor with sliding locking mechanism and center blade which is included in the abdominal box.

The forceps of POZZI, tenaculum, 25 cm, straight (Medicon ref.52-44-50) is introduced.

Used for gripping and immobilization of thick tissues, in particular the cervix (uterine traction forceps). Alternative of the Museux forceps.

The Museux forceps has 2 x 2 teeth, whereas the Pozzi forceps is provided with 1 x 2 teeth only. This is the reason why more bruises could be generated while using the Museux forceps. However, it has the advantage to have a better "grip" on the uterine cervix. The Pozzi forceps is less firm holdingwise, and in the case of a fragile uterine cervix, it can cut the cervix, as it is held by 2 teeth only, which does not occur, or less, while using the Museux forceps. But in most cases, the Pozzi forceps, when correctly used, is less traumatizing.

Both forceps are making part of curretage box, I.U.D.box and Manual Vacuum Aspiration box.

DENTAL INSTRUMENTS and BOX

All the family of the dental instruments and the dental box have been reviewed (new photos, definition and short description). Like for the surgical instruments, we took Medicon as reference for the codes and labels.

One dental forceps n° 86B (for lower molars) is new. This forceps is the only one which has a fine tip: to pull out very damaged teeth or some parts of already broken teeth.

One syndesmotome of Chompret (root elevator) has been added. Besides the sickle shape there is now the straight one. It is used first, to detach the gums from the tooth, before using the sickle one.

Also new: a periodontal pocket probe to evaluate an abscess of the gum.

One curette (to clean the sockets after dental extraction) is removed from the list. (2 others are remaining).

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SURGICAL INSTRUMENT BOX

The abdominal box has got a few changes:

The abdominal retractor of Gosset is now with central blade. The abdominal retractor of Collin is removed from the box. The forceps of Chaput are also removed, while the artery forceps of Bengolea are in number of 4 instead of 2. Two curved artery forceps of Kocher are also added to the box. Total number of instruments: 55.

MEDICAL KITS

Antimalarial drugs and tests

Due to the change of treatment protocols of malaria, antimalarial drugs (Artesunate, Amodiaquine and Sulfadoxine + Pyrimethamine) and rapid tests are added to the following kits, (besides chloroquine and injectable quinine):

KIT, BASIC, 1000 persons/3 months

KIT, DISPENSARY, 1000 persons/3 months

KIT, DISASTER, 1000 persons/15 days

KIT, EMERGENCY HEALTH, 10 000 persons/3 months

KIT, HOSPITAL, 30 beds/3 months + OPD

KIT, SURGICAL, 300 operations

KIT, SURGICAL, 25 operations

The price of some of these kits increased a lot!

A new kit shows up: the Ebola kit.

Kit composed of protection materials for personnel, sampling materials, drugs, documentation and logistic equipment adapted for the management of a haemorrhagic fever epidemic.

It enables the setting up of an isolation unit for ill and suspected patients, the management of the epidemic, and the assessment of new centers of epidemic.

A specialised team for the management of the epidemic is required.

The implementation of an isolation unit, requires the ordering of the complete kit. The necessary supplies for the running of the isolation unit should be ordered as soon as possible. All modules of the kit have their own specificity:

Installation of an isolation unit:

1. drugs
2. medical supplies
3. protection equipment
4. Logistic and sanitation
5. Sampling
6. Library

Pre positionment in risk areas and /or assessment of new centers of epidemic

7. Module " Assessment ": includes materials of the 6 previous modules, but in smaller quantities.

The redons with glass bottles are replaced by disposable plastic redons in the surgical kits, the hospital kit and the medical-surgical kit.

Transfusion module: new tests appear.

Antimalarial test: if positive: treat donor and receiver, and use blood

Hepatitis C test: if positive: discard blood.

In the resuscitation module the new anaesthesia masks replace the old models. The pulse oxymeter is also added to the module.

LABORATORY ITEMS

New items

BATH, WATER, 7 to 15 litres, 20°-100° C Warming bath for liquid with thermostatic control allowing incubation of tubes at chosen temperatures before performing some tests. Model designed to perform the Slidex test on CSF, the antigen tests for cryptococcus, and the biochemical tests (ASAT and ALAT).

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(DAT test) PLATE, MICROTITRATION, 96 wells, V-shaped bottom. Plate composed of 96 small V-shaped wells, used for the incubation of the DAT leishmaniasis test. Do not confuse with U-shaped or flat bottom wells (essential to carry out a reaction of CATT, or other tests i.e. HIV Elisa, hepatitis, syphilis...)

COUNTING CHAMBER, KOVASLIDE, plastic, disposable. Slide designed for counting the cells which are present in different fluids: urine, white blood cells in blood, trypanosoma in CSF. Disposable: no disinfection of the cell and the cover slide. Simple calculation.

Replacing some counting cells with cover slide: counting chamber Nageotte simple grid and Malassez double grid.

PAPER, WHATMANN, n°3, disc Filter paper for qualitative analysis: DAT leishmaniasis test.

Do not confuse with Whatmann paper, n° 4: filter paper for sampling blood.

TUBE, centrifuge, 15 ml, conical bottom sterile plastic Cylindrical transparent sterile plastic tube with conical bottom designed for hand-operated or electric centrifuges in order to examine the cerebrospinal fluid (CSF) and detect cryptococcus. Conical bottom which facilitates the formation of the deposit and suits the centrifuge.

PIPETTE, AUTOMATIC, adjustable volume, 100 - 1000 µl. Automatic pipette used to take accurately a small liquid sample. Reserved for ARV and leishmaniasis programmes.

(pipette automatic 100 to 1 000 µl) TIP, BLUE. Disposable tip used on an automatic pipette (100 to 1000 µl).

PIPETTE FILLER, WITH THUMB-WHEEL LEVER, (Pipump), blue, 2 ml Aspiration and discharge system, which is fitted onto a pipette in order to collect a fluid (strong acid, solvent, blood, serum). Synonym: Aspiration and vacuum pipette. Allows to handle dangerous products safely (avoiding any contact with the mouth and the hands). The green pipette filler of 10 ml was already on list.

(DAT test) AUTOM. PIPETTE, multichannel, 8 chann., 10-100 µl. Automatic pipette allowing the simultaneous distribution of the same volume through 8 different tips, used for the distribution of reagents for the DAT leishmaniasis test.

(DAT test) MULTIPIPETTE (Eppendorf), automatic, 5 positions. Automatic system for pipetting and distribution for serial tests performed on microtitration plate.

(DAT test) COMBITIP (Eppendorf), for multipipette, 2.5 ml. Distribution syringe to be fitted on the multipipette allowing a distribution of the same volume without reloading the syringe. Accessory of the referenced EPPENDORF® multipipette. Suitable volume for the needs of the DAT test.

UNOPETTE, white blood cells. Ready to use system for sampling and dilution of whole blood (1/20) allowing the counting of leucocytes (accuracy of dilution). Possibility of capillary sampling. Avoids mouth pipetting. Allows hand-operated counting of the white blood cells with high reliability. Allows small size laboratories to do without an automatic haematologic analyzer.

ROTATOR, (ITMAS), for CATT test, 12 V Electric rotator of orbital type (circular horizontal stirring), used to carry out the CATT test. Voltage of power source 12 V with connection on battery. Used by mobile teams for mass screening of trypanosomiasis.

The other rotator of orbital type, for agglutination test, 230V is the basic model for a fixed laboratory. Designed for the RPR test, which can also be used for the CATT test.

SPECTROPHOTOMETER, biochemical tests, 230 V Measuring device allowing the reading of chemical reactions. The biochemical dosages are performed with reagents presented in kits. The reaction takes place on serum and the result is read by the spectrophotometer.

Allows the quantitative analysis of blood parameters and the follow-up of side-effects of the anti retroviral drugs.

(Spectrophotometer) MICROCUVETTE, plastic, disposable. Plastic container in which is poured the solution to be read by the spectrophotometer.

Changes

CONTAINER, SAMPLE, sputum, plastic, non-sterile. The screw cap is mandatory: security for the person who is taking the sample, for the sample and the laboratory technician (no spatters, throwing out).

Delete

Expandable rack for slides in stainless steel and rack for staining in glass are deleted from the list and catalogue. Because the expandable rack for slide is quite expensive to buy and easy to find or manufacture on the spot. The

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staining rack isn't recommended at all for the giemsa staining nor for the Ziehl-Neelsen staining procedures, those are the most common stainings performed on the field.

Counting chamber Nageotte simple grid and Malassez double grid disappeared from the list. They weren't often bought and can be replaced by any of the other counting chambers of the list : Neubauer counting chamber or Kova-slide.

LABORATORY REAGENTS

New

INDIAN INK, black, cryptococcus, 50 ml, bot. Indian ink for drawing, used for cryptococcus test in CSF.

(DAT test) 2-MERCAPTO-ETHANOL, 500 ml, bot. Reagent used in the DAT leishmaniasis test to preserve samples for testing by delaying their oxidation process.

Synonym: Thioglycol.

Delete

Ammonium oxalate, powder

Fuchsin Kinyoun, solution this solution was supposed to be used for the staining of Mycobacterium leprae. This can be done by cold method with the normal fuchsin reagent present on the list.

Gentian Violet, phenique, solution we kept only the reagents presented in powder.

Giemsa slow stain powder, Giemsa rapid stain solution, Giemsa rapid stain powder were removed from the list. All the different giemsa solution bring confusion. We keep only one Giemsa slow stain solution on the list. The same solution can be used everywhere and dilution and time of staining are checked locally depending on the quality of the reagent and the water used.

Glycerol, solution was supposed to be used for preparation of giemsa solution, but now we have only the giemsa slow solution, on the list, we don't need glycerol anymore.

Vinciane Cruyt

28/01/2002