

Moderator: Hi, thank you for taking part, if possible can you take a look at this photo? Have you seen people with this before?

Respondent: is it in this hospital? Or elsewhere?

Moderator: anywhere in Ethiopia is possible.

Respondent: I have seen it when I was intern in other hospital.

Moderator: are they common in Ethiopia? Do you know them?

Respondent: yes.

Moderator: what causes them?

Respondent: most of them are fungal infection. Especially the tineas. Over the head also is the fungal infection. On the nail is also another fungal infection.

Moderator: how do people develop this condition? Is it from person to person? Animal to person?

Respondent: most of the infection happen from person to person and also from animal to person. Because of the patients coming are mostly from the rural area, they will acquire the disease from the animals.

Moderator: And are they problem? Is it really bad for people having this?

Respondent: psychologically as well as, there is itching. Most of the patients are children. Their friends will tell them that they are diseased.

Moderator: they are isolated from their friends because of having this. Are they allowed to get to school with these infections? What would you do if patient come with this to your hospital?

Respondent: we can advise to keep their hygiene. The other thing is the pharmacological treatment or medication. PO medication or antifungal topical medication.

Moderator: are they available here in this hospital?

Respondent: most of them are not available in this hospital?

Moderator: do you know why that is?

Respondent: already we talk with the hospital. Because of the financial problem it's not available here in this hospital. Not only antifungals but also the others are not available.

Moderator: if you prescribe medication to patient, can they go and buy from the private pharmacies.

Respondent: They can buy both from the private pharmacy and the [charitable organisation]. But from the latter it will be cheaper.

Moderator: so that happens a lot?

Respondent: very interesting.

Moderator: can I show you this? If a patient come to you and you took an X ray similar to this what would be your first thought?

Respondent: it may be TB for me.

Moderator: is it very common here?

Respondent: yes it's common.

Moderator: will you do other tests or X- ray is your first test?

Respondent: these areas are TB burden area. And the first thing is we will take history of coughing. Shortness of breath. We investigate the CBC, ASR the next one is the gene expert.

Moderator: what would you do if this person has negative test result?

Respondent: especially in RBI patient and the HIV patient and in children it can be negative. The gene expert is negative and the X- ray can also be negative. The person with chest X-ray like this we can treat with antibiotic like Augmentin and amoxicillin we treat them with that. If the patient is getting cured we will repeat the X-ray and the gene expert. And then if there is no improvement again. We will take time and focus on the patient. We may start TB clinically. This area is one of the best known for its TB burden for that reason we will start anti TB.

Moderator: for the fungal disease on the skin with antifungal is the one you prescribe most?

Respondent: we have no KOH here. No specific fungal medications. We will have mostly the candidiasis infection that we will treat clinically. For especially RVI patients have common fungal infection. And the oral thrush. We can treat with the fluconazole oral gel. Or if it's oropharyngeal, fluconazole PO. And for the skin infection, if the patient have no any systemic symptom like fever. We can treat him with the topical antifungal medications. Otherwise if it's systemic we can give him fluconazole and the like.

Moderator: how long is the course of treatment for the oral thrush for example?

Respondent: it will be 7 to 10 days.

Moderator: is the patient compliance good? Do they struggle to finish the whole course sometimes?

Respondent: most of the time the patient may not return back here. So we don't know. But that means the treatment is improved. For the other disease for example if the patient don't have the improvement they will come back here.

Moderator: are patients able to buy the antifungals without prescription? Or they need prescription from you in order to buy the antifungals from the different pharmacy?

Respondent: in governmental pharmacy they will not give the drug without prescription. But in some private they do give the drug without the prescription. The patient will show the previous leaflet so that they will be given the drug.

Moderator: is the medication affordable for the people in this area? Is it expensive?

Respondent: most of the patient will tell us that it is expensive beyond their affordability.

Moderator: how many of your patients are not getting the medication? of wich you are prescribing the drug? Is it 100%, 50%?

Respondent: it will probably be around 50%.

Moderator: what do you think is the main reason for this? Is it price, availability? Is there anything else?

Respondent: both of them. Mostly, the price.

Moderator: have you seen any signs of resistance with the antifungal medications?

Respondent: no signs.

Moderator: do you have any safety issue regarding the antifungal medications? Is there any side effect compliant from the patient?

Respondent: we don't tell them the side effect. If they can read from the leaflet they will get from that but most of the time we will not tell them the side effects.

Moderator: do you think the patients are worried a lot about the side effect?

Respondent: we will ask the women patients if they are pregnant we will ask them their last menstruation period. And then we will give them the medication. We will not tell them other complications other than this.

Moderator: have you ever seen a horse like this?

Respondent: I think I have seen all of them. I have seen this kind of horses on the road and also in Adama. After the owners have worked with them for long time they will have this disease and they will throw them out on the street.

Moderator: do you think this have a risk to human?

Respondent: yea. If there are active lesions they may transfer.

Moderator: you have mentioned that the availability of the antifungal medications are problem. Do you have any recommendation so that the antifungal medications can easily available?

Respondent: we discuss even today with the hospital officer to make available all the drug. In the future after this week, all of the drug will be available from the PFSA with the lower cost possible.

Moderator: is there anything you want to tell us about the antifungal medication? Is there anything I have missed and you want to tell us?

Respondent: No

Moderator: thank you so much for your time.