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Installation of field laboratories (LABOMEDCAMP) in Mali: initial assessment and sustainability

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Introduction: The health status of populations is strongly affected by access to quality health care. It is the quality of the diagnosis that will determine the therapeutic approach. In this context, the laboratory plays an essential role in improving the quality of care, monitoring patients, and surveillance of chronic and potentially epidemic diseases. It is also a key tool in the implementation of programmes to combat priority communicable diseases (malaria, HIV, tuberculosis). The aim of setting up field laboratories in Mali in community health centres run by doctors is to improve the medical care of rural populations, especially mothers and children, through quality diagnosis and biological monitoring.

Method: To ensure sustainable operation, the process of setting up a laboratory includes: prospecting/feasibility study, definition of the package of activities to be offered with their standard operating procedures (SOPs) and the necessary equipment, training of the doctor-laboratory technician pair and the training of the labourers on biomedical waste management. In addition, a monitoring and training process and an external quality assessment are in place.

Results: From 2011 to date, 22 rural laboratories have been set up in the regions of Kayes, Koulikoro, Sikasso and Ségou, and are operational, with 61 human resources trained (24 doctors, 37 laboratory technicians). All biological examinations carried out were validated on the basis of SOPs. They were able to carry out 119,816 biological analyses, including 39,378 in children under 5 years of age. During prenatal consultations, 20,003 pregnant women received prenatal check-ups. 35,686 haemoglobin levels in children and pregnant women led to the detection of 17,404 cases of anaemia. As part of the search for malaria, in addition to the rapid diagnostic tests (RDTs), 42,261 thick drops were carried out, of which 25,769 were positive. As part of the fight against sickle cell disease, approximately 10,000 RDTs were used and more than 350 cases of major sickle cell disease were diagnosed.

Conclusion: 22 field laboratories (LABOMEDCAMP) have been set up and are operational in rural areas of 4 regions of Mali with the support of health personnel and the participation of the population. The integration of the activities of these laboratories into the monitoring-training and external quality evaluation process and into the routine activities of the reference health centres is a guarantee of sustainability.